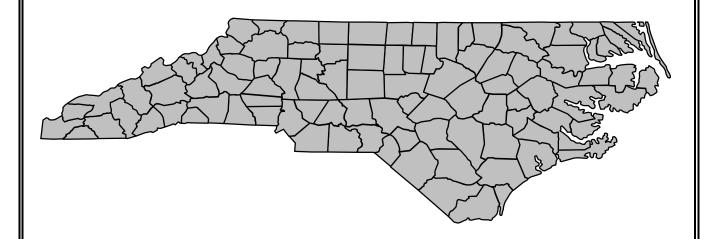
# North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

# Annual and Fourth Quarter Report on Critical Incidents, Deaths, and Use of Seclusion and Restraint in Area Authorities/County Programs

for State Fiscal Year 2003-2004



#### prepared by

Quality Management Team
Community Policy Management Section
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
North Carolina Department of Health and Human Services

November 2004

## **Notes for Annual and Fourth Quarter Report**

As now required by North Carolina General Statute, Area Authorities/County Programs (AA/CPs) receive and must review all Critical Incidents and Death Reports from Category A and B providers as defined in 10A NCAC 27G.0602 in their catchment areas for mental health, developmental disability and substance abuse services. Programs are to analyze this collected information as part of their quality management efforts and to report summarized information to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services quarterly. This is both the first annual and the fourth quarterly statewide report summarizing this new information. The reporting and analysis of information on critical incidents and deaths must be an important part of any effort to manage the quality of care being delivered. This statewide report is meant to support local efforts in improving the quality of care being delivered.

This report is organized around three main sections. The first section of the report summarizes the data received this first year into annual numbers for each AA/CP for the various types of critical incidents. The reporting includes data on 122C licensed facilities, except hospitals, and unlicensed community-based providers. The reporting does not include data on state institutions, hospitals, nursing homes or other category C providers which are not covered by the new regulations. The types of incidents include deaths; abuse, neglect, or exploitation; injury requiring treatment by a physician; medication errors; the use of seclusion and restraint; and other types of critical incidents.

The second section of the report summarizes the findings of AA/CPs with regards to their own analyses of the fourth quarter data, highlighting common areas of concern and some of the quality improvement steps being taken.

The third major section of the report displays the collected quarterly data for all four quarters for the year for each AA/CP on the various types of critical incidents. The quarterly rates should not be compared directly to the annual data. The quarterly data counts the numbers of clients active for that quarter while the annual data counts active clients for the year. The annual client count is higher than any given quarter.

We hope the information in this report will begin to provide a useful overview of the numbers of critical incidents, deaths, and use of seclusion and restraint being reported across the community system in North Carolina. The process of constructing and improving these reports is ongoing. We welcome your suggestions on how we can make them more useful and more relevant to your questions and concerns. To provide feedback please contact:

Dale Roenigk or Candy Helms
Quality Management Team
Community Policy Management Section
North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
3004 Mail Service Center
Raleigh, North Carolina 27699-3004

(919) 733-0696 email: contactdmhquality@ncmail.net

# **Report Summary**

As noted in the introduction, the statewide reporting of critical incidents and deaths is a new process. The task of implementing this new process when combined with the major changes being undertaken in how local services are being provided and managed mean that this will of necessity be a developmental process. Time will be needed to get all providers fully reporting the required data.

The total number of critical incidents and deaths reported for State Fiscal Year 2003-2004 was 7,029. The rate of reported incidents per 1,000 active clients for the year was 21.3 statewide, but there is substantial variation in this rate by local programs. Some of this variation appears to be related to presence of higher numbers of residential providers per capita than the statewide average. However, for this first year much of the difference would seem to be due to differences in the degree of provider reporting. The numbers of providers filing reports at some point in the year relative to the number of licensed providers in the catchment area varied signficantly by area program. Similarly, the average number of reports filed and the frequency of filing also varied. Making sure all providers are aware of and complying with reporting requirements for critical incidents is an important concern for local management entities and county programs.

The most common type of reported critical incidents were injuries to clients but most were classified into the less serious category of "other accident or injury". The next most common category of critical incidents were allegations of abuse, neglect or injury with most of these being for abuse. Client absence with notification and medication errors were slightly behind this category. Finally, medication errors were slightly lower with most of these being for missed doses. Combined these four categories reprsented two-thirds of the reported critical incidents for the year.

Examining the quarterly trend data show the number of critical incidents being reported and the number of providers filing reports rising over the first four quarters of the effort. This upward trend almost certainly reflects better reporting over the course of the year as providers understood the requirements rather than an actual upward trend in real critical incidents. These trends will continued to be monitored at the state level to help assess compliance and monitor the level of critical incidents.

Assessments by AA/CPs about the trends in their own catchment areas provide a mixed picture about the level of reporting. While some programs have noted increased reporting, others have seen decreased reporting or late and inaccurate reporting. Local programs will need to continue to work with the providers in their catchment areas to make sure that all required critical incidents are being reported to help support quality improvement and protect clients being served.

#### **Table of Contents**

# Annual and Quarterly Report on Critical Incidents, Deaths, and Use of Seclusion and Restraint in Area Authorities/County Programs

# Annual and Fourth Quarter State Fiscal Year 2003-2004 (April-June 2004)

Notes for Annua	al and Fourth Quarter Report	1
Report Summar	у	2
Local Program (	Catchment Area Changes	5
Annual Repo	rting	
Compariso	on Data for Reporting	
	Annual Number of Providers Submitting Critical Incident Reports Compared to Providers In Area	6
	Average Number of Reports per Provider	7
Reported 0	Critical Incidents and Deaths	
	Total Number of Critical Incident and Death Reports Received	8
	Deaths Reported	
	Annual Numbers and Rate per 1,000 Active Clients	9
	Abuse, Neglect, and Exploitation	
	Annual Numbers and Rate per 1,000 Active Clients	10
	Injury Requiring Treatment by Physician	
	Annual Numbers and Rate per 1,000 Active Clients	11
	Medication Errors	
	Annual Numbers and Rate per 1,000 Active Clients	12
	Other Critical Incidents	
	Annual Numbers and Rate per 1,000 Active Clients	13
	Consumer Restrained or In Seclusion at Time of Critical Incident	
	Annual Numbers and Rate per 1,000 Active Clients	14
All Reporte	ed Use of Seclusion and Restraint	
	Annual Numbers of Reported Use of Seclusion and Restraint, Rates, and Average Uses of Seclusion and Restraint	15
	rates, and Average oses of occident and restraint	

# **Table of Contents (continued)**

# Annual and Quarterly Report on Critical Incidents, Deaths, and Use of Seclusion and Restraint in Area Authorities/County Programs

# Annual and Fourth Quarter State Fiscal Year 2003-2004 (April-June 2004)

# **Quarterly Reporting**

Highlights of	Trend Analysis Quality Improvement Efforts by Area Programs				
	Summary of Trends Reported	17			
	Examples of Trend Analyses Reported	18			
Highlights of Trend Analysis Quality Improvement Efforts by Area Programs Summary of Trends Reported Examples of Trend Analyses Reported  Summarized Data  Comparison Data for Reporting Number of Providers Submitting Critical Incident Reports Compared to Providers In Area Average Number of Reports per Provider  Reported Critical Incidents and Deaths Total Number of Critical Incident and Death Reports Received  Deaths Reported Numbers Rate per 1,000 Active Clients Abuse, Neglect, and Exploitation Numbers Rate per 1,000 Active Clients Injury Requiring Treatment by Physician Numbers Rate per 1,000 Active Clients Medication Errors Numbers Rate per 1,000 Active Clients Other Critical Incidents Numbers Rate per 1,000 Active Clients Other Critical Incidents Numbers Rate per 1,000 Active Clients Consumer Restrained or In Seclusion at Time of Critical Incident Numbers Rate per 1,000 Active Clients					
Compar					
	<del>-</del>	22			
	•				
	Average Number of Reports per Provider	23			
Reporte					
	Total Number of Critical Incident and Death Reports Received	24			
		25			
	• ,	26			
		27			
	• •	28			
		29			
	• •	30			
		24			
		31			
	• •	32			
		33			
	• •	34			
		35			
		36			
	Rate per 1,000 Active Chefts	30			
All Repo	orted Use of Seclusion and Restraint				
	Numbers of Reported Use of Seclusion and Restraint	37			
	Rates and Average Uses of Seclusion and Restraint	38			

# **Local Program Catchment Area Changes**

As reform is being implemented in the North Carolina public mental health, developmental disability, and substance abuse service system, local programs are being consolidated and in some cases realigned along different county combinations. These changes can present difficulties in looking at data over time and keeping track of the changes. This added page will list program consolidations or changes as they affect the reporting of critical incident data.

To provide comparisons over time, the choice has been made to go back to prior data and consolidate it into new program catchment area numbers as the changes occur. By combining the data where possible into the new catchment areas for prior quarters, comparisons of changes over time become possible. It is important to understand that the consolidations will probably affect local program operation and reporting of data by providers. Thus, the prior quarter(s) data from these new programs' catchment areas may not be completely comparable because local administration change may affect provider reporting to some degree. Comparing changes over time in these newly aligned programs should be made with this understanding in mind.

The table below lists old programs, the new program consolidations, and when these changes were effective for the purpose of this quarterly reporting. As new changes are put into place, this table will be updated.

Old Programs	New Program	Changes Effective
Blue Ridge Rutherford-Polk Trend	Western Highlands	Consolidation took place after end of second quarter. Rutherford-Polk did not report data for second quarter so the numbers for the new area reflect some missing data for the second quarter.
Duplin-Sampson Lenoir Wayne	Eastpointe	Consolidation took place before start of year so all data reflect the new program.
Sandhills Randolph	Sandhills	Consolidation took place before start of year so all data reflect the new program.
Piedmont Davidson	Piedmont	Consolidation took place after end of second quarter. Davidson did not report data for second quarter so the numbers for the new area reflect some missing data for the second quarter.

# Table A1 - Annual Numbers of Providers Submitting Critical Incident Reports and Numbers of Licensed Providers in Catchment Area

Comparing the numbers of providers who submitted critical incident reports against the numbers of licensed providers in a catchment area provides some insight into the degree of reporting by providers and how widespread critical incidents are. Low numbers of providers reporting relative to the number of licensed providers in a catchment area may point to inadequate reporting of critical incidents. More study over time will be needed to assess this.

The number of providers reporting critical incidents at some point for the year relative to the number of licensed providers ranged from a low of 11.4 percent to a high of 100.0 percent with a statewide average of 29.2 percent for the year. Not all programs were able to provide an unduplicated count of providers submitting reports for the year.

			License	ed Providers	in Catchment	Area
	Total Number of Providers Who Submitted Critical Incident and Death Reports (unduplicated for the year)	Providers Submitting Reports as a Percentage of Total Licensed Providers in Catchment Area	Total Licensed Providers in Catchment Area	Residential Group Home Providers	Non- Residential Providers	ICF-MR Providers
Alamance-Caswell	22	25.9%	85	69	11	5
Albemarle	23	45.1%	51	28	19	4
Catawba	14	27.5%	51	31	15	5
Centerpoint	22	19.0%	116	80	25	11
Crossroads	34	37.8%	90	46	34	10
Cumberland	NR	NR	243	202	30	11
Durham	NR	NR	148	114	21	13
Eastpointe 1	35	18.3%	191	146	27	18
Edgecombe-Nash	19	37.3%	51	42	5	4
Foothills	44	39.3%	112	67	34	11
Guilford	37	15.1%	245	198	31	16
Johnston	12	21.4%	56	43	8	5
Lee-Harnett	NR	NR	63	44	11	8
Mecklenburg	75	20.4%	367	303	35	29
Neuse	NR	NR	76	45	22	9
New River	39	46.4%	84	39	33	12
Onslow	38	59.4%	64	49	12	3
OPC	32	37.2%	86	56	20	10
Pathways	98	38.4%	255	199	38	18
Piedmont 1 & 2	NR	NR	301	220	60	21
Pitt	22	31.4%	70	50	12	8
Riverstone	24	100.0%	24	13	6	5
Roanoke-Chowan	37	92.5%	40	27	12	1
Rockingham	15	32.6%	46	36	8	2
Sandhills <sup>1</sup>	70	41.7%	168	118	36	14
Smoky Mountain	8	11.4%	70	45	20	5
Southeastern Center	36	41.4%	87	50	28	9
Southeastern Regional	NR	NR	142	93	38	11
Tideland	11	19.0%	58	33	17	8
VGFW	22	30.1%	73	56	13	4
Wake	38	14.4%	264	209	36	19
Western Highlands 1 & 2	51	25.9%	197	127	52	18
Wilson-Greene	19	26.4%	72	58	11	3
All AA/CPs	007	00.00/	2.072	0.040	500	057
Reporting	897	29.2%	3,073	2,218	598	257
Minimum		11.4%				
Median		31.4%				
Maximum		100.0%				
"NR" means the program di	d not submit the data for a	n undunlicated count o	f providere cub	mitting report	e for the year	

<sup>&</sup>quot;NR" means the program did not submit the data for an unduplicated count of providers submitting reports for the year.

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table A2 - Annual Average Number of Reports per Provider

The average number of critical incident and death reports per provider provides some insight into the level of reporting and of how concentrated the incidents are by provider. The average number of quarters providers reported indicates how often on average they reported.

The average number of reports for providers who submitted reports was 6.1 for the year. For the providers who did submit reports, on average they submitted during 2.0 quarters out of the possible total of four quarters. Higher averages per provider and higher frequency may point to more reporting by residential providers.

	Total Number of Providers Who Submitted Critical	Total Number of Critical Incident	Average Number of Reports per	Average Number of Quarters the
	Incident and Death Reports	and Death	Provider Filing	Providers
	(unduplicated count)	Reports	Reports	Reported
Alamance-Caswell	22	115	5.2	2.9
Albemarle	23	123	5.3	0.9
Catawba	14	213	15.2	4.0
Centerpoint	22	154	7.0	1.8
Crossroads	34	157	4.6	2.1
Cumberland	NR	484	NR	NR
Durham	NR	131	NR	NR
Eastpointe 1	35	280	8.0	1.7
Edgecombe-Nash	19	185	9.7	3.6
Foothills	44	208	4.7	2.2
Guilford	37	218	5.9	1.8
Johnston	12	44	3.7	1.5
Lee-Harnett	NR	18	NR	NR
Mecklenburg	75	1070	14.3	1.7
Neuse	NR	62	NR	NR
New River	39	144	3.7	1.9
Onslow	38	324	8.5	2.5
OPC	32	78	2.4	1.8
Pathways	98	603	6.2	2.7
Piedmont 1 & 2	NR	757	NR	NR
Pitt	22	98	4.5	2.1
Riverstone	24	36	1.5	1.2
Roanoke-Chowan	37	84	2.3	0.9
Rockingham	15	21	1.4	0.7
Sandhills <sup>1</sup>	70	333	4.8	1.7
Smoky Mountain	8	15	1.9	1.6
Southeastern Center	36	292	8.1	2.3
Southeastern Regional	NR	135	NR	NR
Tideland	11	23	2.1	1.5
VGFW	22	62	2.8	1.9
Wake	38	338	8.9	2.4
Western Highlands 1 & 2	51	171	3.4	1.5
Wilson-Greene	19	53	2.8	1.4
All AA/CPs Reporting	897	5,442	6.1	2.0
Minimum			1.4	0.7
Median			4.7	1.8
Maximum			15.2	4.0
			· · · · · · · · · · · · · · · · · · ·	

<sup>&</sup>quot;NR" means the program did not submit the data for an unduplicated count of providers submitting reports for the year.

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table A3 - Annual Numbers and Rates of Total Critical Incident and Death Reports Received

This table shows the total number of Critical Incident and Death reports filed by local providers in each catchment area for the year and the relative rate per 1,000 consumers on the active caseload. Because programs vary substantially in size, comparisons across program are more appropriately done after adjusting for these differences. Although active caseload probably represents the best measure of size, it is important to note that a few areas have substantial numbers of consumers from other areas not on their active caseload but being served in their local residential programs which may have the effect of increasing their relative rates. Further study of this will be done over time to see if additional adjustments need to be made for the rates.

Statewide, the rate of Critical Incident and Death reports was 21.3 per 1,000 active caseload for the entire year. There is wide variation among local programs in their annual rate. The two programs with the highest rates also have much larger numbers of residential beds per capita in their catchment areas. The annual rate should not be directly compared to the quarterly rates because of how clients get counted for the year versus for the quarters.

	Total Number of Critical Incident	Rate of Total Critical Incident and Death
	and Death Reports	Reports per 1,000 Active Caseload
Alamance-Caswell	115	16.3
Albemarle	123	25.0
Catawba	213	44.0
Centerpoint	154	5.4
Crossroads	157	19.1
Cumberland	484	69.2
Durham	131	17.4
Eastpointe <sup>1</sup>	280	20.7
Edgecombe-Nash	185	33.1
Foothills	208	18.4
Guilford	218	11.2
Johnston	44	9.6
Lee-Harnett	18	2.9
Mecklenburg	1,070	24.7
Neuse	62	9.9
New River	144	21.7
Onslow	324	63.0
OPC	78	10.4
Pathways	603	41.6
Piedmont 1 & 2	757	71.4
Pitt	98	17.1
Riverstone	36	8.0
Roanoke-Chowan	84	17.6
Rockingham	21	6.3
Sandhills <sup>1</sup>	333	22.2
Smoky Mountain	15	1.5
Southeastern Center	292	30.8
Southeastern Regional	135	11.7
Tideland	23	3.3
VGFW	62	11.1
Wake	338	31.5
Western Highlands 1 & 2	171	12.2
Wilson-Greene	53	8.3
All AA/CPs Reporting	7,029	21.3
Minimum		1.5
Median		17.4
Maximum		71.4

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table A4 - Annual Numbers and Rate of Reported Deaths by Cause of Death

This table summarizes the <u>annual</u> numbers and rates of deaths reported by both the totals and by cause of death.

Three-fifths of the deaths reported were due to terminal illness or natural causes. One fifth of the deaths listed the cause as unknown.

		Nı	umber of	Deaths Re	ported		ı	Rate of De	eaths per	1,000 Act	ive Consumers	•
	All Deaths	Suicide	Accident	Homicide/ Violence	Terminal Illness or Other Natural Cause	Unknown Cause	All Deaths	Suicide	Accident	Homicide/ Violence	Terminal Illness or Other Natural Cause	Unknown Cause
Alamance-Caswell	8	0	1	0	5	2	1.14	0.00	0.14	0.00	0.71	0.28
Albemarle	6	1	0	0	3	2	1.22	0.20	0.00	0.00	0.61	0.41
Catawba	8	0	2	1	4	1	1.65	0.00	0.41	0.21	0.83	0.21
Centerpoint	24	0	5	6	9	4	0.85	0.00	0.18	0.21	0.32	0.14
Crossroads	36	4	2	0	13	17	4.38	0.49	0.24	0.00	1.58	2.07
Cumberland	39	0	6	2	25	6	5.58	0.00	0.86	0.29	3.58	0.86
Durham	7	0	0	3	4	0	0.93	0.00	0.00	0.40	0.53	0.00
Eastpointe 1	17	0	0	0	15	2	1.26	0.00	0.00	0.00	1.11	0.15
Edgecombe-Nash	3	1	0	0	1	1	0.54	0.18	0.00	0.00	0.18	0.18
Foothills	16	1	2	0	12	1	1.42	0.09	0.18	0.00	1.06	0.09
Guilford	51	4	3	0	27	17	2.62	0.21	0.15	0.00	1.39	0.87
Johnston	0	0	0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00
Lee-Harnett	2	0	0	0	2	0	0.32	0.00	0.00	0.00	0.32	0.00
Mecklenburg	26	2	3	0	12	9	0.60	0.05	0.07	0.00	0.28	0.21
Neuse	9	0	2	0	7	0	1.44	0.00	0.32	0.00	1.12	0.00
New River	19	5	2	0	5	7	2.87	0.75	0.30	0.00	0.75	1.06
Onslow	5	0	0	0	4	1	0.97	0.00	0.00	0.00	0.78	0.19
OPC	12	2	0	0	8	2	1.60	0.27	0.00	0.00	1.07	0.27
Pathways	48	3	3	3	34	5	3.31	0.21	0.21	0.21	2.34	0.34
Piedmont 1 & 2	10	0	1	0	7	2	0.94	0.00	0.09	0.00	0.66	0.19
Pitt	24	1	4	1	15	3	4.19	0.17	0.70	0.17	2.62	0.52
Riverstone	10	1	0	0	9	0	2.22	0.22	0.00	0.00	2.00	0.00
Roanoke-Chowan	0	0	0	0	0	0	0.00	0.00	0.00	0.00	0.00	0.00
Rockingham	9	0	0	2	3	4	2.70	0.00	0.00	0.60	0.90	1.20
Sandhills <sup>1</sup>	47	1	3	1	25	17	3.14	0.07	0.20	0.07	1.67	1.13
Smoky Mountain	7	0	1	0	4	2	0.71	0.00	0.10	0.00	0.40	0.20
Southeastern Center	24	1	4	2	15	2	2.53	0.11	0.42	0.21	1.58	0.21
Southeastern Regional	10	1	1	0	8	0	0.87	0.09	0.09	0.00	0.70	0.00
Tideland	1	0	0	0	1	0	0.15	0.00	0.00	0.00	0.15	0.00
VGFW	5	1	0	1	3	0	0.90	0.18	0.00	0.18	0.54	0.00
Wake	28	12	1	1	10	4	2.61	1.12	0.09	0.09	0.93	0.37
Western Highlands 1 & 2	16	4	2	0	8	2	1.14	0.29	0.14	0.00	0.57	0.14
Wilson-Greene	5	0	0	0	3	2	0.78	0.00	0.00	0.00	0.47	0.31
All AA/CPs Reporting	532	45	48	23	301	115	1.61	0.14	0.15	0.07	0.91	0.35
Minimum							0.00	0.00	0.00	0.00	0.00	0.00
Median							1.22	0.05	0.09	0.00	0.75	0.20
Maximum							5.58	1.12	0.86	0.60	3.58	2.07
L	ı						0.00		0.00	0.00	0.00	

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table A5 - Annual Numbers and Rate of Reported Allegations of Abuse, Neglect, or Exploitation

This table summarizes the annual numbers and rates of reported allegations of abuse, neglect or exploitation.

Nearly three-fourths of the reports were for alleged abuse. Statewide, the number of reported allegations was 3.10 per 1,000 consumers.

	Reported A	llegations of Ab	use, Neglect, or E	Exploitation	Rate of Reporte		Abuse, Neglect, ve Consumers	or Exploitation
	Total Reported Allegations (unduplicated)	Alleged Abuse	Alleged Neglect	Alleged Exploitation	Total Reported Allegations (unduplicated)	Alleged Abuse	Alleged Neglect	Alleged Exploitation
Alamance-Caswell	28	28	0	0	3.98	3.98	0.00	0.00
Albemarle	3	3	0	0	0.61	0.61	0.00	0.00
Catawba	4	4	0	0	0.83	0.83	0.00	0.00
Centerpoint	20	15	5	0	0.71	0.53	0.18	0.00
Crossroads	8	3	7	1	0.97	0.36	0.85	0.12
Cumberland	106	80	20	7	15.16	11.44	2.86	1.00
Durham	16	9	6	1	2.12	1.19	0.80	0.13
Eastpointe 1	140	130	8	4	10.35	9.61	0.59	0.30
Edgecombe-Nash	25	19	6	0	4.47	3.40	1.07	0.00
Foothills	10	12	2	0	0.88	1.06	0.18	0.00
Guilford	28	17	11	0	1.44	0.87	0.56	0.00
Johnston	5	5	0	1	1.09	1.09	0.00	0.22
Lee-Harnett	6	3	1	0	0.96	0.48	0.16	0.00
Mecklenburg	114	85	23	8	2.64	1.97	0.53	0.18
Neuse	10	10	4	1	1.60	1.60	0.64	0.16
New River	19	9	9	1	2.87	1.36	1.36	0.15
Onslow	23	10	13	0	4.47	1.94	2.53	0.00
OPC	7	5	2	0	0.94	0.67	0.27	0.00
Pathways	82	45	31	6	5.65	3.10	2.14	0.41
Piedmont 1 & 2	82	64	17	1	7.73	6.03	1.60	0.09
Pitt	16	13	3	0	2.79	2.27	0.52	0.00
Riverstone	9	3	6	0	2.00	0.67	1.33	0.00
Roanoke-Chowan	24	16	8	0	5.02	3.34	1.67	0.00
Rockingham	4	3	1	0	1.20	0.90	0.30	0.00
Sandhills 1	100	68	29	3	6.67	4.54	1.93	0.20
Smoky Mountain	2	2	0	1	0.20	0.20	0.00	0.10
Southeastern Center	56	29	13	15	5.91	3.06	1.37	1.58
Southeastern Regional	14	9	4	1	1.22	0.78	0.35	0.09
Tideland	7	6	1	0	1.02	0.87	0.15	0.00
VGFW	8	5	2	1	1.44	0.90	0.36	0.18
Wake	18	14	3	1	1.68	1.30	0.28	0.09
Western Highlands 1 & 2	24	18	6	1	1.71	1.28	0.43	0.07
Wilson-Greene	6	5	2	0	0.93	0.78	0.31	0.00
All AA/CPs	1024	747	243	54	3.10	2.26	0.74	0.16
Reporting								
Minimum					0.20	0.20	0.00	0.00
Median					1.68	1.19	0.52	0.07
Maximum					15.16	11.44	2.86	1.58

Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table A6 - Annual Numbers and Rate of Reported Injuries Requiring Treatment by a Physician

This table summarizes the <u>annual</u> numbers and rates of reported injuries to consumers requiring treatment by a physician.

Two-thirds of the reported injuries fell into the "other" category. Self-injury was the next most common category representing 16% of the totals reported for the year.

	Numbe	r of Report	ed Injuries Requ	uiring Trea	tment by a Phy	ysician	Rate of Reported Injuries to Consumers per 1,000 Active Consumers					umers
Г	Total	Injury Due	Injury from Use		Injury Caused	Other	Total	Injury Due to	Injury from Use of		Injury Caused	Other
	Reported	to Suicide	of a Hazardous	Self-Injury	by Another	Accident	Reported	Suicide	a Hazardous	Self-Injury	by Another	Accident or
	Injuries	Attempt	Substance		Client	or Injury	Injuries	Attempt	Substance		Client	Injury
Alamance-Caswell	35	1	0	3	3	28	4.97	0.14	0.00	0.43	0.43	3.98
Albemarle	15	0	0	9	1	5	3.05	0.00	0.00	1.83	0.20	1.02
Catawba	43	3	0	0	0	40	8.88	0.62	0.00	0.00	0.00	8.26
Centerpoint	50	0	0	2	2	46	1.77	0.00	0.00	0.07	0.07	1.62
Crossroads	52	1	0	23	2	26	6.32	0.12	0.00	2.80	0.24	3.16
Cumberland	56	8	0	15	10	23	8.01	1.14	0.00	2.15	1.43	3.29
Durham	45	2	1	7	4	31	5.97	0.27	0.13	0.93	0.53	4.12
Eastpointe <sup>1</sup>	61	0	0	8	8	45	4.51	0.00	0.00	0.59	0.59	3.33
Edgecombe-Nash	48	3	0	15	9	21	8.59	0.54	0.00	2.68	1.61	3.76
Foothills	67	6	0	4	0	57	5.93	0.53	0.00	0.35	0.00	5.04
Guilford	57	9	0	11	0	37	2.93	0.46	0.00	0.56	0.00	1.90
Johnston	10	5	0	0	1	4	2.18	1.09	0.00	0.00	0.22	0.87
Lee-Harnett	5	0	1	1	0	3	0.80	0.00	0.16	0.16	0.00	0.48
Mecklenburg	269	18	3	69	27	152	6.22	0.42	0.07	1.60	0.62	3.51
Neuse	23	1	0	3	2	17	3.68	0.16	0.00	0.48	0.32	2.72
New River	40	0	0	6	2	32	6.03	0.00	0.00	0.90	0.30	4.83
Onslow	40	0	1	7	10	22	7.78	0.00	0.19	1.36	1.94	4.28
OPC	31	7	0	4	2	18	4.14	0.94	0.00	0.53	0.27	2.40
Pathways	195	18	1	33	29	114	13.44	1.24	0.07	2.27	2.00	7.86
Piedmont 1 & 2	245	39	0	25	15	166	23.10	3.68	0.00	2.36	1.41	15.65
Pitt	17	0	0	3	2	12	2.97	0.00	0.00	0.52	0.35	2.10
Riverstone	8	1	0	2	1	4	1.77	0.22	0.00	0.44	0.22	0.89
Roanoke-Chowan	25	0	0	1	1	23	5.23	0.00	0.00	0.21	0.21	4.81
Rockingham	3	0	0	0	0	3	0.90	0.00	0.00	0.00	0.00	0.90
Sandhills <sup>1</sup>	68	5	0	12	4	47	4.54	0.33	0.00	0.80	0.27	3.14
Smoky Mountain	7	0	0	0	0	7	0.71	0.00	0.00	0.00	0.00	0.71
Southeastern Center	93	4	1	6	7	75	9.82	0.42	0.11	0.63	0.74	7.92
Southeastern Regional	9	1	0	4	0	4	0.78	0.09	0.00	0.35	0.00	0.35
Tideland	12	0	0	2	2	8	1.75	0.00	0.00	0.29	0.29	1.16
VGFW	24	0	0	2	4	18	4.31	0.00	0.00	0.36	0.72	3.23
Wake	104	20	0	4	4	76	9.69	1.86	0.00	0.37	0.37	7.08
Western Highlands 1 & 2	54	5	1	8	2	38	3.85	0.36	0.07	0.57	0.14	2.71
Wilson-Greene	23	0	1	4	5	13	3.58	0.00	0.16	0.62	0.78	2.02
All AA/CPs												
Reporting	1,834	157	10	293	159	1,215	5.55	0.48	0.03	0.89	0.48	3.68
Minimum							0.71	0.00	0.00	0.00	0.00	0.35
Median							4.51	0.16	0.00	0.53	0.29	3.16
Maximum							23.10	3.68	0.19	2.80	2.00	15.65

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table A7 - Annual Numbers and Rate of Reported Medication Errors

This table summarizes the <u>annual</u> numbers and rates of reported medication errors.

More than three-fourths of the reported medication errors were due to a missed dose. A single client missing multiple doses can produce high numbers in a short time.

		Reported Med	ication Errors		Rate of Re	eported Medicati	on Errors per 1, umers	000 Active
	Total Medication Errors Reported	Missed Dose of Prescription Medication	Wrong Dosage Administered	Wrong Medication Administered	Total Medication Errors Reported	Missed Dose of Prescription Medication	Wrong Dosage Administered	Wrong Medication Administered
Alamance-Caswell	15	4	6	5	2.13	0.57	0.85	0.71
Albemarle	5	5	0	0	1.02	1.02	0.00	0.00
Catawba	94	88	5	1	19.41	18.17	1.03	0.21
Centerpoint	21	15	5	1	0.74	0.53	0.18	0.04
Crossroads	34	28	6	0	4.13	3.40	0.73	0.00
Cumberland	164	154	7	3	23.46	22.03	1.00	0.43
Durham	5	2	2	1	0.66	0.27	0.27	0.13
Eastpointe <sup>1</sup>	17	16	1	0	1.26	1.18	0.07	0.00
Edgecombe-Nash	14	11	2	1	2.51	1.97	0.36	0.18
Foothills	84	71	11	2	7.43	6.28	0.97	0.18
Guilford	11	8	2	1	0.56	0.41	0.10	0.05
Johnston	0	0	0	0	0.00	0.00	0.00	0.00
Lee-Harnett	0	0	0	0	0.00	0.00	0.00	0.00
Mecklenburg	98	65	24	9	2.27	1.50	0.55	0.21
Neuse	12	11	1	0	1.92	1.76	0.16	0.00
New River	21	11	9	1	3.17	1.66	1.36	0.15
Onslow	8	7	1	0	1.56	1.36	0.19	0.00
OPC	0	0	0	0	0.00	0.00	0.00	0.00
Pathways	57	44	11	2	3.93	3.03	0.76	0.14
Piedmont 1 & 2	21	12	7	2	1.98	1.13	0.66	0.19
Pitt	0	0	0	0	0.00	0.00	0.00	0.00
Riverstone	5	3	1	1	1.11	0.67	0.22	0.22
Roanoke-Chowan	8	4	4	0	1.67	0.84	0.84	0.00
Rockingham	1	1	0	0	0.30	0.30	0.00	0.00
Sandhills 1	17	15	1	1	1.13	1.00	0.07	0.07
Smoky Mountain	0	0	0	0	0.00	0.00	0.00	0.00
Southeastern Center	76	39	26	11	8.02	4.12	2.74	1.16
Southeastern Regional	16	11	5	0	1.39	0.96	0.43	0.00
Tideland	2	0	0	2	0.29	0.00	0.00	0.29
VGFW	10	7	2	1	1.79	1.26	0.36	0.18
Wake	81	75	3	3	7.55	6.99	0.28	0.28
Western Highlands 1 & 2	14	6	8	0	1.00	0.43	0.57	0.00
Wilson-Greene	1	1	0	0	0.16	0.16	0.00	0.00
All AA/CPs	912	714	150	48	2.76	2.16	0.45	0.15
Reporting	012	7 17	100	40	2.10	2.10	0.70	0.10
Minimum			-		0.00	0.00	0.00	0.00
Median					1.39	1.00	0.27	0.05
Maximum					23.46	22.03	2.74	1.16

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table A8 - Annual Numbers and Rate of Other Reported Critical Incidents

This table summarizes the <u>annual</u> numbers and rates of other types of critical incidents.

Client absence without notification was by far the most common type of these other critical incidents. Higher rates for client absence may be reflective of more residential beds per capita.

		Other Re	ported Critical I	ncidents		Othe	er Reported Critic	cal Incidents per	1,000 Active Cli	ents
	Client Absence Without Notification for more than 3 Hours	Suspension of a Client from Services	Expulsion of a Client from Services	Arrest of a Client for Violations of Local, State, or Federal Law	Fire or Equipment Failure that has Resulted in Death or Injury	Client Absence Without Notification for more than 3 Hours	Suspension of a Client from Services	Expulsion of a Client from Services	Arrest of a Client for Violations of Local, State, or Federal Law	Fire or Equipment Failure that has Resulted in Death or Injury
Alamance-Caswell	22	0	4	3	0	3.13	0.00	0.57	0.43	0.00
Albemarle	14	0	0	0	0	2.85	0.00	0.00	0.00	0.00
Catawba	8	0	0	0	0	1.65	0.00	0.00	0.00	0.00
Centerpoint	5	5	2	12	0	0.18	0.18	0.07	0.42	0.00
Crossroads	8	2	0	3	0	0.97	0.24	0.00	0.36	0.00
Cumberland	79	1	0	16	0	11.30	0.14	0.00	2.29	0.00
Durham	42	0	0	13	0	5.58	0.00	0.00	1.73	0.00
Eastpointe 1	31	0	0	12	0	2.29	0.00	0.00	0.89	0.00
Edgecombe-Nash	22	32	38	4	0	3.94	5.73	6.80	0.72	0.00
Foothills	18	1	0	7	1	1.59	0.09	0.00	0.62	0.09
Guilford	58	0	2	11	0	2.98	0.00	0.10	0.56	0.00
Johnston	14	1	0	2	0	3.05	0.22	0.00	0.44	0.00
Lee-Harnett	3	0	0	2	0	0.48	0.00	0.00	0.32	0.00
Mecklenburg	240	14	7	41	0	5.55	0.32	0.16	0.95	0.00
Neuse	0	0	0	1	0	0.00	0.00	0.00	0.16	0.00
New River	10	1	1	2	0	1.51	0.15	0.15	0.30	0.00
Onslow	2	1	0	5	0	0.39	0.19	0.00	0.97	0.00
OPC	11	12	1	5	0	1.47	1.60	0.13	0.67	0.00
Pathways	71	26	6	19	0	4.89	1.79	0.41	1.31	0.00
Piedmont 1 & 2	100	17	11	19	0	9.43	1.60	1.04	1.79	0.00
Pitt	23	1	3	5	0	4.02	0.17	0.52	0.87	0.00
Riverstone	0	1	0	1	0	0.00	0.22	0.00	0.22	0.00
Roanoke-Chowan	18	0	0	6	0	3.76	0.00	0.00	1.25	0.00
Rockingham	1	0	0	0	0	0.30	0.00	0.00	0.00	0.00
Sandhills 1	67	3	0	12	0	4.47	0.20	0.00	0.80	0.00
Smoky Mountain	0	0	0	1	0	0.00	0.00	0.00	0.10	0.00
Southeastern Center	33	2	1	7	0	3.48	0.21	0.11	0.74	0.00
Southeastern Regional	21	0	0	9	0	1.83	0.00	0.00	0.78	0.00
Tideland	1	0	0	0	0	0.15	0.00	0.00	0.00	0.00
VGFW	5	0	0	3	0	0.90	0.00	0.00	0.54	0.00
Wake	53	6	13	4	0	4.94	0.56	1.21	0.37	0.00
Western Highlands 1 & 2	23	0	27	4	0	1.64	0.00	1.93	0.29	0.00
Wilson-Greene	4	11	0	1	0	0.62	1.71	0.00	0.16	0.00
All AA/CPs	1,007	137	116	230	1	3.05	0.41	0.35	0.70	0.00
Reporting										
Minimum						0.00	0.00	0.00	0.00	0.00
Median						1.83	0.14	0.00	0.54	0.00
Maximum						11.30	5.73	6.80	2.29	0.09

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table A9 - Annual Numbers and Rates of Consumers in Restraint or Seclusion at Time of Critical Incidents

This table summarizes the annual numbers and rates of consumers who were in restraint or seclusion at the time of a critical incident.

The statewide reported rate for situations where restraint or seclusion were in use at the time of a critical incident was 2.82 per 1,000 active clients for the year. Almost of all the reported cases involved physical restraints.

		Consumer in ne of Critical		Seclusion at	Rate of Reported Cases of Consumers in Restraint or Seclusion at Time of Critical Incident per 1,000 Active Consumers			
	Total Cases of Restraint or Seclusion (unduplicated)	Physically Restrained	Chemically Restrained	In Seclusion	Total Cases of Restraint or Seclusion (unduplicated)	Physically Restrained	Chemically Restrained	In Seclusion
Alamance-Caswell	1	1	0	0	0.14	0.14	0.00	0.00
Albemarle	53	62	0	0	10.78	12.61	0.00	0.00
Catawba	59	59	0	0	12.18	12.18	0.00	0.00
Centerpoint	0	0	0	0	0.00	0.00	0.00	0.00
Crossroads	16	0	0	0	1.94	0.00	0.00	0.00
Cumberland	5	5	0	0	0.72	0.72	0.00	0.00
Durham	8	7	0	1	1.06	0.93	0.00	0.13
Eastpointe 1	9	9	0	0	0.67	0.67	0.00	0.00
Edgecombe-Nash	0	0	0	0	0.00	0.00	0.00	0.00
Foothills	0	0	0	0	0.00	0.00	0.00	0.00
Guilford	4	4	0	0	0.21	0.21	0.00	0.00
Johnston	12	14	0	0	2.62	3.05	0.00	0.00
Lee-Harnett	2	2	0	0	0.32	0.32	0.00	0.00
Mecklenburg	212	203	6	4	4.90	4.69	0.14	0.09
Neuse	2	2	0	0	0.32	0.32	0.00	0.00
New River	17	17	0	0	2.56	2.56	0.00	0.00
Onslow	46	46	0	0	8.94	8.94	0.00	0.00
OPC	0	0	0	0	0.00	0.00	0.00	0.00
Pathways	71	67	0	4	4.89	4.62	0.00	0.28
Piedmont 1 & 2	256	244	0	11	24.14	23.01	0.00	1.04
Pitt	1	1	0	0	0.17	0.17	0.00	0.00
Riverstone	2	1	1	0	0.44	0.22	0.22	0.00
Roanoke-Chowan	1	1	0	0	0.21	0.21	0.00	0.00
Rockingham	3	3	0	0	0.90	0.90	0.00	0.00
Sandhills <sup>1</sup>	8	8	0	0	0.53	0.53	0.00	0.00
Smoky Mountain	1	1	0	0	0.10	0.10	0.00	0.00
Southeastern Center	75	75	0	0	7.92	7.92	0.00	0.00
Southeastern Regional	28	28	0	0	2.44	2.44	0.00	0.00
Tideland	0	0	0	0	0.00	0.00	0.00	0.00
VGFW	0	0	0	0	0.00	0.00	0.00	0.00
Wake	21	21	0	0	1.96	1.96	0.00	0.00
Western Highlands 1 & 2	13	13	0	0	0.93	0.93	0.00	0.00
Wilson-Greene	4	4	0	0	0.62	0.62	0.00	0.00
All AA/CPs	930	898	7	20	2.82	2.72	0.02	0.06
Reporting	შა0	090		20	2.02	2.12	0.02	0.06
Minimum					0.00	0.00	0.00	0.00
Median					0.67	0.62	0.00	0.00
Maximum	Lastabment area at some n				24.14	23.01	0.22	1.04

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table A10 - Annual Numbers and Rates of Total Reported Use of Consumers in Restraint or Seclusion

This table summarizes the annual numbers and rates of reported use of restraint or seclusion including those cases where no critical incident happened.

Physical Restraint represents nearly all of the reported uses.

	-	d Uses of S nd Restrai			er of Cons			estraint or Active Co	Seclusion onsumers	_	Uses of Re	
	Physical Restraint	Chemical Restraint	Seclusion	Physical Restraint	Chemical Restraint	Seclusion	Physical Restraint	Chemical Restraint	Seclusion	Physical Restraint	Chemical Restraint	Seclusion
Alamance-Caswell	69	0	0	15	0	0	9.81	0.00	0.00	4.60	None	None
Albemarle	84	0	0	44	0	0	17.08	0.00	0.00	1.91	None	None
Catawba	94	0	0	53	0	0	19.41	0.00	0.00	1.77	None	None
Centerpoint	42	0	3	24	0	3	1.48	0.00	0.11	1.75	None	1.00
Crossroads	187	0	74	76	0	23	22.73	0.00	8.99	2.46	None	3.22
Cumberland	111	0	0	64	0	0	15.88	0.00	0.00	1.73	None	None
Durham	9	0	1	8	0	1	1.19	0.00	0.13	1.13	None	1.00
Eastpointe 1	707	0	0	76	0	0	52.27	0.00	0.00	9.30	None	None
Edgecombe-Nash	67	0	0	27	0	0	11.99	0.00	0.00	2.48	None	None
Foothills	83	0	0	51	0	0	7.34	0.00	0.00	1.63	None	None
Guilford	41	0	0	14	0	0	2.11	0.00	0.00	2.93	None	None
Johnston	0	0	0	0	0	0	0.00	0.00	0.00	None	None	None
Lee-Harnett	12	0	0	9	0	0	1.92	0.00	0.00	1.33	None	None
Mecklenburg	580	6	10	257	4	10	13.41	0.14	0.23	2.26	1.50	1.00
Neuse	40	0	0	13	0	0	6.39	0.00	0.00	3.08	None	None
New River	51	0	0	29	0	0	7.69	0.00	0.00	1.76	None	None
Onslow	39	0	0	31	0	0	7.58	0.00	0.00	1.26	None	None
OPC	7	0	0	7	0	0	0.94	0.00	0.00	1.00	None	None
Pathways	52	0	4	52	0	4	3.58	0.00	0.28	1.00	None	1.00
Piedmont 1 & 2	244	0	11	162	0	8	23.01	0.00	1.04	1.51	None	1.38
Pitt	15	0	0	1	0	0	2.62	0.00	0.00	15.00	None	None
Riverstone	1	1	0	1	1	0	0.22	0.22	0.00	1.00	1.00	None
Roanoke-Chowan	1	0	0	1	0	0	0.21	0.00	0.00	1.00	None	None
Rockingham	3	0	0	3	0	0	0.90	0.00	0.00	1.00	None	None
Sandhills 1	151	0	35	55	0	4	10.07	0.00	2.34	2.75	None	8.75
Smoky Mountain	17	0	0	13	0	0	1.72	0.00	0.00	1.31	None	None
Southeastern Center	165	0	0	82	0	0	17.42	0.00	0.00	2.01	None	None
Southeastern Regional	98	0	9	48	0	6	8.53	0.00	0.78	2.04	None	1.50
Tideland	8	0	0	6	0	0	1.16	0.00	0.00	1.33	None	None
VGFW	6	0	16	6	0	14	1.08	0.00	2.87	1.00	None	1.14
Wake	47	1	1	28	1	1	4.38	0.09	0.09	1.68	1.00	1.00
Western Highlands 1 & 2	50	0	0	34	0	0	3.57	0.00	0.00	1.47	None	None
Wilson-Greene	8	0	0	6	0	0	1.25	0.00	0.00	1.33	None	None
All AA/CPs	3,089	8	164	1,296	6	74	9.35	0.02	0.50	2.38	1.33	2.22
Reporting	3,008	O	104	1,290	U	14						
Minimum							0.00	0.00	0.00	1.00	1.00	1.00
Median							4.38	0.00	0.00	1.71	1.00	1.07
Maximum							52.27	0.22	8.99	15.00	1.50	8.75
1 Programs which changed					_							-

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

4th Quarter Tables

#### **Summary of Trends Reported**

One of the purposes of reporting critical incidents, deaths and use of seclusion and restraint quarterly is to identify trends and patterns across the state that provide shared opportunities for improvement. Common trends across the area authorities/county programs (AA/CPs) may indicate opportunities for AA/CPs to learn from each other. They may also point to issues that need to be addressed systematically statewide, either by the Division or by the North Carolina Council of Community Programs.

The table below lists patterns identified by AA/CPs during the fourth quarter of reporting. The four most common patterns identified are increased reporting of incidences, high numbers of medication errors, high number of client absences and decrease in the use of restrictive intervention.

	Identified Trends	Number (Percent) of AA/CPs Citing This
		Issue (33 total)
Critical	Increased reporting of incidents	4 (12.1%)
Incidents	Increased number of reporting providers	2 (6.1%)
	Decreased reporting of incidents	3 (9.1%)
	Late, under- and inaccurate reporting	3 (9.1%)
	Increased incidents of arrests	1 (3.0%)
	High numbers of client absences	4 (12.1%)
	High numbers of medication errors	5 (15.2%)
	Increased reporting of abuse/neglect	2 (6.1%)
Deaths	No identified trends	
Seclusion	High use of restrictive interventions	1 (3.0%)
and	Increased use of restrictive interventions	2 (6.1%)
Restraints	Increased number of consumers restrained due to	1 (3.0%)
	increased number of providers reporting after LME's	
	training	
	Decreased use of restrictive interventions	5 (15.2%)
	Increased seclusion due to decreased use of restraints	1 (3.0%)
	Under-reporting of restrictive interventions	1 (3.0%)
<b>AA/CPs</b>	Reviewing treatment plans based on trends	1 (3.0%)
Use of		
Reports		
and		
Trends		

# **Examples of Trend Analyses Reported**

The area authority/county program (AA/CP) reports cited below provide an overview of how AA/CPs are identifying and responding to patterns in deaths, critical incidents and use of seclusion and restraint. Excerpts from these reports are included because they provide good examples of (1) identification of patterns/trends; (2) analysis of patterns/trends; (3) actions taken in response to reports; (4) follow-up actions (5) system changes implemented to improve services and, (6) recommendations for actions to be taken at the state system level.

NOTE: AA/CPs were asked for permission to identify their programs by name.

#### Identification of Patterns/Trends

#### Alamance-Caswell

There was a decrease in the reported Critical Incidents this quarter from 36 to 28. The number of Providers submitting decreased from 16 to 9. There is not a clear explanation for this decrease. One trend analysis made this quarter is there is a pattern of times incidents are occurring with three of our providers who submit the greatest number of incident reports. In one of the Level III group homes there is an increase in incidents around mid morning and when residents get home form school or day programming until dinner time. Incidents appeared to decrease at bedtime. A reason for this may be the level of structure in school and the number people the residents have to interact with. When residents return home there is the shift and routine change. In one of the DD providers and one of the Residential Substance Abuse Providers the greatest number of incidents occur from around 5:30 to 11:00. Transition times in the DD group homes can be difficult. From reviewing admission logs at a Residential Service for Substance Abuse Treatment the time frame from 5:30 to 11:00 was when many of the admissions were occurring.

#### Analysis of Patterns/Trends

#### Cumberland

There was a substantial decrease in number of therapeutic holds during this quarter with fewer consumers being involved. Reasons for this will continue to be analyzed. It is not known if this is due to schedules for the summer being different for consumers and them having more activities that they would deem "fun" because it is summer or if other factors are involved. Providers will again be asked to submit their internal analysis of restrictive interventions for comparison to reports received earlier.

#### Smoky Mountain

The LME is now receiving a log of all incidents, including restrictive interventions, from the area's largest provider. The increase in numbers over previous quarterly reports reflects this and not an actual increase in the use of restraints. In fact, a retrospective

review by this provider revealed a significant decrease in its use of restraints and isolation time-outs during the period from January 2004 through May 2004.

#### Actions Taken in Response to Trends

#### **CenterPoint**

Many providers are still not submitting Critical Incident/Death Reports. CenterPoint plans to include this information in a provider training next fiscal year (sfy 2004-05). Review of critical incidents and restrictive interventions triggered several provider monitoring visits.

#### Cumberland

There were 16 AWOL for more than three hours involving 13 consumers. Running away is noted to be a problem being addressed in the service plans for all of the consumers. For one consumer, in an adult facility, the consumer disarmed the security system and left the facility. Bed check protocols were not being followed. Treatment team is addressing along with case manager and the provider. Two consumers had more than one AWOL. Because of lapses in supervision within one of the facilities and concerns about the ability of the provider to meet the needs of the consumers, a full monitoring visit was completed that did identify deficiencies in the competency level of staff for monitoring high risk adolescents and understanding how to implement identified interventions. Technical assistance is being offered to the provider.

#### OPC

Due to an unusual increase in the number of injuries to consumers and staff from dog bites, information about personal safety was published in OPC's monthly personnel newsletter. This information was also added to the CPI "Alternatives to Restrictive Interventions" training that all new employees receive.

Significant injuries to a consumer from falls were noted. Worked with provider and forwarded request to use restrictive devices (monitor and bed rails) to Client Rights Committee for approval.

#### Piedmont

PBH completed its Investigation of a provider agency and terminated the contract. Four providers need to complete a Plan Of Correction for reasons such as: client rights violations, restrictive intervention issues and implementation review.

#### Onslow

There were 23 physical restraints reported which more than doubled the amount from last quarter (8 restraints), however the amount of clients that were restrained this quarter (14 clients) almost doubled from last quarter (8 clients).

The Quality Management Council and Clients Rights Committee continues to recommend more thorough training in appropriate Crisis Prevention Intervention (CPI)

to providers. This training would assist providers in recognizing other techniques to deescalate and to also recognize not getting into "power struggles" with clients.

#### Follow-Up Actions

#### Cumberland

Comprehensive training was made available to providers during this quarterly on all aspects of quality improvement and quality management. Over 60 providers attended the training and reviews indicate that the providers are attempting to implement QI protocols in compliance with Division Rules. Providers are also starting to identify system performance indicators as well as outcome measures for individual consumers. Deficiencies continue in the area of Client Rights but again improvements are seen for some providers. A training program specifically addressing client rights standards is being planned during the next quarter in conjunction with training on new monitoring standards.

## System Changes Implemented to Improve the QA/QI Process

#### Pathways

Designated members of The Quality Improvement department continue to review each incident report submitted. Every Death is immediately forwarded to the Client Rights Officer for consultation, review and follow up. The Death Review Committee convenes as necesarry to conduct psychological autoposy and review of deaths concerning suicide, homocide, or other questionable causes.

Every Incident report submitted is discussed between the Quality Improvement Coordinator, Client Rights Coordinator, Customer Service Representaive and the assigned Provider Relations Specialist as needed. Investigations and reviews occur as needed by the Death Review Committee.

Customer Service Representative inputs each incident report into a database that will be utilized for monitoring and analysis of type, frequency and severity.

All incident reports are reviewed immediately by the Client Rights Coordinator and investigated as needed. The Quality Improvement Management Team meets weekly to review all Concerns, Complaints and Incidents.

The Consumer Complaint Policy has been approved and implemented.

Total number of Complaints and Incidents are reported Monthly to LME Management, Consumer Family Advisory Committee, Client Rights Committee and the Quality Improvement Management Team.

Implementation of the Restrictive Intervention log has been approved and implemented for all Providers. All forms have been posted on the Internet for accessability to all Providers and are beng submitted to the LME as requested.

## Recommendations for Actions to be Taken at the State System Level

#### CenterPoint

Many providers are not reporting restrictive interventions to the LME. There is confusion among providers as to the definition of various restrictive interventions. Hopefully a state-mandated reporting form will be provided.

NOTE: New Incident and Death Report form and Restrictive Intervention Details Report form are being implemented October 1, 2004. Providers may use the State Restrictive Intervention Details Report form or their own comparable form.

# Table 1 - Numbers of Providers Submitting Critical Incident Reports and Numbers of Licensed Providers in Catchment Area for the Fourth Quarter

Comparing the numbers of providers who submitted critical incident reports against the numbers of licensed providers in a catchment area provides some insight into the degree of reporting by providers and how widespread critical incidents are. Low numbers of providers reporting relative to the number of licensed providers in a catchment area may point to inadequate reporting of critical incidents. More study over time will be needed to assess this.

The number of providers reporting critical incidents relative to the number of licensed providers ranged from a low of 4.9 percent to a high of 50.0 percent with a statewide average of 15.4 percent for the fourth quarter.

			License	ed Providers	in Catchment	Area
	Total Number of Providers Who Submitted Critical Incident and Death Reports	Providers Submitting Reports as a Percentage of Total Licensed Providers in Catchment Area	Total Licensed Providers in Catchment Area	Residential Group Home Providers	Non- Residential Providers	ICF-MR Providers
Alamance-Caswell	17	20.0%	85	69	11	5
Albemarle	12	23.5%	51	28	19	4
Catawba	16	31.4%	51	31	15	5
Centerpoint	14	12.1%	116	80	25	11
Crossroads	8	8.9%	90	46	34	10
Cumberland	49	20.2%	243	202	30	11
Durham	11	7.4%	148	114	21	13
Eastpointe 1	20	10.5%	191	146	27	18
Edgecombe-Nash	18	35.3%	51	42	5	4
Foothills	26	23.2%	112	67	34	11
Guilford	23	9.4%	245	198	31	16
Johnston	5	8.9%	56	43	8	5
Lee-Harnett	4	6.3%	63	44	11	8
Mecklenburg	18	4.9%	367	303	35	29
Neuse	9	11.8%	76	45	22	9
New River	18	21.4%	84	39	33	12
Onslow	20	31.3%	64	49	12	3
OPC	18	20.9%	86	56	20	10
Pathways	62	24.3%	255	199	38	18
Piedmont 1 & 2	45	15.0%	301	220	60	21
Pitt	13	18.6%	70	50	12	8
Riverstone	12	50.0%	24	13	6	5
Roanoke-Chowan	11	27.5%	40	27	12	1
Rockingham	3	6.5%	46	36	8	2
Sandhills <sup>1</sup>	41	24.4%	168	118	36	14
Smoky Mountain	5	7.1%	70	45	20	5
Southeastern Center	18	20.7%	87	50	28	9
Southeastern Regional	21	14.8%	142	93	38	11
Tideland	8	13.8%	58	33	17	8
VGFW	18	24.7%	73	56	13	4
Wake	33	12.5%	264	209	36	19
Western Highlands 1 & 2	20	10.2%	197	127	52	18
Wilson-Greene	7	9.7%	72	58	11	3
All AA/CPs	623	15.4%	4,046	2,936	780	330
Reporting						
Minimum		4.9%				
Median		15.0%				
Maximum		50.0%				
1 Drograms which changed	actobment area at a		r Coo paga 5			

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table 2 - Quarterly Average Number of Reports per Provider

The average number of critical incident and death reports per provider provides some insight into the level of reporting and of how concentrated the incidents are by provider.

The number of providers who submitted reports has grown each quarter. The average and the level of variation in the average number of reports per provider was lower in the last half of the year. This may reflect smaller providers now reporting and/or improvements in the level of reporting. More data over time will be needed to assess these patterns.

		Number o ed Critical Rep				ge Numbe rovider Fil	•	•
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	7	21	19	17	3.0	1.4	1.9	1.6
Albemarle	1	1	6	12	39.0	13.0	3.3	4.3
Catawba	4	17	19	16	1.8	3.6	3.3	5.1
Centerpoint	5	12	9	14	2.8	3.7	5.3	3.4
Crossroads	41	7	16	8	1.2	2.6	2.9	5.5
Cumberland	17	54	49	49	4.2	1.8	3.5	2.9
Durham	37	9	17	11	1.0	1.7	3.1	2.4
Eastpointe <sup>1</sup>	4	15	21	20	8.5	4.2	3.9	5.1
Edgecombe-Nash	16	15	19	18	2.6	2.9	2.3	3.1
Foothills	25	21	23	26	2.8	3.1	1.3	1.6
Guilford	14	14	14	23	3.7	4.2	3.1	2.8
Johnston	3	6	4	5	3.0	2.3	3.3	1.6
Lee-Harnett	3	5	2	4	1.7	1.0	1.0	1.5
Mecklenburg	32	38	38	18	9.0	11.3	4.8	9.4
Neuse	10	3	8	9	1.3	2.7	2.0	2.8
New River	24	22	10	18	1.6	1.5	3.1	2.3
Onslow	29	20	25	20	3.1	3.1	3.2	4.6
OPC	12	15	12	18	1.6	1.5	1.2	1.2
Pathways	42	84	73	62	5.6	1.8	1.5	1.7
Piedmont <sup>1 &amp; 2</sup>	36	34	43	45	5.0	5.4	4.5	4.5
Pitt	7	9	17	13	3.0	3.3	1.7	1.4
Riverstone	5	3	9	12	1.6	1.0	1.1	1.3
Roanoke-Chowan	3	9	12	11	1.7	2.1	2.7	2.5
Rockingham	4	2	2	3	1.3	1.5	1.0	3.7
Sandhills <sup>1</sup>	30	27	24	41	3.6	2.4	2.7	2.3
Smoky Mountain	4	1	3	5	1.5	1.0	1.0	1.0
Southeastern Center	28	19	17	18	2.8	5.0	3.9	3.0
Southeastern Regional	6	9	9	21	4.3	1.6	2.7	3.4
Tideland	3	2	4	8	1.3	1.0	2.0	1.1
VGFW	8	4	11	18	1.0	1.3	1.5	1.8
Wake	16	16	27	33	3.5	5.8	3.0	3.2
Western Highlands 1 & 2	18	12	27	20	2.2	1.9	2.4	2.2
Wilson-Greene	4	9	6	7	2.0	1.3	2.3	2.7
All AA/CPs Reporting	498	535	595	623	3.4	3.3	2.9	3.0
Minimum					1.0	1.0	1.0	1.0
Median					2.8	2.3	2.7	2.7
Maximum					39.0	13.0	5.3	9.4

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table 3 - Quarterly Numbers and Rates of Total Critical Incident and Death Reports Received

This table shows the total number of Critical Incident and Death reports filed by local providers in each catchment area and the relative rate per 1,000 consumers on the active caseload. Because programs vary substantially in size, comparisons across program are more appropriately done after adjusting for these differences. Although active caseload probably represents the best measure of size, it is important to note that a few areas have substantial numbers of consumers from other areas not on their active caseload but being served in their local residential programs which may have the effect of increasing their relative rates. Further study of this will be done over time to see if additional adjustments need to be made for the rates.

Statewide, the average rate of Critical Incident and Death reports was 7.4 per 1,000 active caseload for the fourth quarter. This statewide rate has been fairly stable across the four quarters. There is wide variation from program to program and between the four quarters for individual programs.

	Total Nu	mber of C Death F	ritical Inci Reports	dent and		f Total Crit ۱ Reports Case	per 1,000 /	
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	21	30	36	28	4.1	5.8	7.0	4.7
Albemarle	39	13	20	51	10.7	3.9	6.2	16.2
Catawba	7	62	63	81	2.5	20.8	20.2	27.7
Centerpoint	14	44	48	48	1.1	3.9	4.3	4.0
Crossroads	48	18	47	44	10.2	3.9	10.6	8.9
Cumberland	72	98	173	141	16.4	22.2	38.0	29.8
Durham	37	15	53	26	5.5	2.7	9.9	4.7
Eastpointe 1	34	63	82	101	3.4	6.6	8.7	10.2
Edgecombe-Nash	42	44	44	55	9.8	11.3	11.3	15.6
Foothills	70	66	30	42	7.1	6.6	3.6	4.1
Guilford	52	59	43	64	3.2	3.5	2.5	4.1
Johnston	9	14	13	8	3.0	4.7	4.0	2.3
Lee-Harnett	5	5	2	6	1.2	1.2	0.5	1.3
Mecklenburg	287	430	183	170	10.0	14.2	5.6	4.2
Neuse	13	8	16	25	2.7	1.5	3.0	4.7
New River	39	32	31	42	7.9	6.6	6.5	8.7
Onslow	90	62	81	91	21.2	14.3	17.9	18.1
OPC	19	23	14	22	3.6	4.3	2.4	3.6
Pathways	234	152	112	105	26.1	17.1	12.3	10.8
Piedmont 1 & 2	179	185	192	201	22.8	25.1	27.2	24.2
Pitt	21	30	29	18	5.0	7.0	6.7	4.3
Riverstone	8	3	10	15	2.1	8.0	2.7	3.8
Roanoke-Chowan	5	19	32	28	1.4	5.0	8.0	6.6
Rockingham	5	3	2	11	2.0	1.2	0.8	4.8
Sandhills <sup>1</sup>	108	65	64	96	13.1	7.7	7.4	8.7
Smoky Mountain	6	1	3	5	1.0	0.2	0.4	0.7
Southeastern Center	77	95	66	54	11.2	13.7	9.6	8.3
Southeastern Regional	26	14	24	71	3.0	1.6	2.7	7.2
Tideland	4	2	8	9	0.7	0.4	1.5	1.6
VGFW	8	5	17	32	2.0	1.3	4.3	7.3
Wake	56	93	82	107	7.3	10.9	8.9	10.9
Western Highlands 1 & 2	39	23	65	44	4.2	2.5	7.1	4.8
Wilson-Greene	8	12	14	19	1.5	2.1	2.4	3.1
All AA/CPs	4.000	4 700	4.000	4.000	7.0	7.0	7.0	7.4
Reporting	1,682	1,788	1,699	1,860	7.3	7.8	7.3	7.4
Minimum					0.7	0.2	0.4	0.7
Median					4.1	4.7	6.5	4.8
Maximum					26.1	25.1	38.0	29.8

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table 4 - Quarterly Numbers of Reported Deaths by Cause of Death

This table summarizes the numbers of deaths reported by both the totals and by cause of death.

Most deaths reported were due to terminal illness, natural causes, or of unknown cause.

										Nu	mber	of De	aths F	Report	ted									
		All D	eaths			Sui	cide			Acci	dent		Hor	nicide	/Viole	nce		rminal er Natı			Un	know	n Cau	se
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr												
Alamance-Caswell	2	2	4	0	0	0	0	0	0	1	0	0	0	0	0	0	2	0	3	0	0	1	1	0
Albemarle	3	0	3	0	1	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	2	0
Catawba	4	1	1	2	0	0	0	0	1	0	0	1	0	0	0	1	2	1	1	0	1	0	0	0
Centerpoint	0	7	6	11	0	0	0	0	0	3	1	1	0	0	0	6	0	2	3	4	0	2	2	0
Crossroads	7	6	7	16	1	1	0	2	0	1	0	1	0	0	0	0	4	2	2	5	2	2	5	8
Cumberland	9	11	12	7	0	0	0	0	1	3	1	1	1	1	0	0	6	6	8	5	1	1	3	1
Durham	3	2	2	0	0	0	0	0	0	0	0	0	1	1	1	0	2	1	1	0	0	0	0	0
Eastpointe <sup>1</sup>	2	1	4	10	0	0	0	0	0	0	0	0	0	0	0	0	2	1	3	9	0	0	1	1
Edgecombe-Nash	0	1	0	2	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Foothills	5	4	2	5	0	0	0	1	2	0	0	0	0	0	0	0	3	4	2	3	0	0	0	1
Guilford	14	21	7	9	2	0	1	1	0	2	0	1	0	0	0	0	9	12	4	2	3	7	2	5
Johnston	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lee-Harnett	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0
Mecklenburg	7	2	10	7	0	0	2	0	1	1	0	1	0	0	0	0	4	1	3	4	2	0	5	2
Neuse	1	2	3	3	0	0	0	0	0	2	0	0	0	0	0	0	1	0	3	3	0	0	0	0
New River	4	8	3	4	2	3	0	0	1	0	1	0	0	0	0	0	1	3	0	1	0	2	2	3
Onslow	0	4	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	1	0	1	0	0
OPC	4	3	4	1	1	1	0	0	0	0	0	0	0	0	0	0	2	2	3	1	1	0	1	0
Pathways	22	12	10	4	2	1	0	0	1	1	1	0	2	0	0	1	14	9	8	3	3	1	1	0
Piedmont 1 & 2	3	3	1	3	0	0	0	0	1	0	0	0	0	0	0	0	2	1	1	3	0	2	0	0
Pitt	4	9	9	2	0	0	0	1	1	2	1	0	1	0	0	0	2	7	5	1	0	0	3	0
Riverstone	0	1	0	9	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	8	0	0	0	0
Roanoke-Chowan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Rockingham	0	0	2	7	0	0	0	0	0	0	0	0	0	0	0	2	0	0	1	2	0	0	1	3
Sandhills <sup>1</sup>	12	4	19	12	0	0	1	0	0	1	0	2	0	0	1	0	9	3	7	6	3	0	10	4
Smoky Mountain	5	0	1	1	0	0	0	0	1	0	0	0	0	0	0	0	2	0	1	1	2	0	0	0
Southeastern Center	4	6	10	4	0	0	1	0	0	3	0	1	1	1	0	0	2	2	8	3	1	0	1	0
Southeastern Regional	2	0	2	6	0	0	0	1	0	0	0	1	0	0	0	0	2	0	2	4	0	0	0	0
Tideland	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
VGFW	2	1	1	1	1	0	0	0	0	0	0	0	0	1	0	0	1	0	1	1	0	0	0	0
Wake	3	11	7	7	0	9	1	2	0	0	1	0	1	0	0	0	2	1	3	4	0	1	2	1
Western Highlands 1 & 2	1	5	4	6	1	0	2	1	0	2	0	0	0	0	0	0	0	3	0	5	0	0	2	0
Wilson-Greene	0	3	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	0	2	0	0
All AA/CPs Reporting	124	130	136	142	11	15	8	11	10	22	6	10	7	4	2	10	77	67	76	81	19	22	44	30

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.
<sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table 5 - Quarterly Rate of Reported Deaths per 1,000 Active Consumers by Cause of Death

This table summarizes the rate of reported deaths per 1,000 active clients. These rates offer a better comparison measure than the actual numbers due to the significant variation in program size.

Statewide, the average number of deaths per 1,000 active clients was 0.57 in the fourth quarter. This rate has been fairly stable statewide across the four quarters.

								F	Rate o	f Deat	ths pe	r 1,00	0 Act	ive Co	nsun	ners								
	A	All Dea	aths			Sui	cide			Acci	dent	-	Hon	nicide	/Viole	nce		minal r Natı			Un	know	n Cau	ise
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr												
Alamance-Caswell	0.39	0.39	0.78	0.00	0.00	0.00	0.00	0.00	0.00	0.19	0.00	0.00	0.00	0.00	0.00	0.00	0.39	0.00	0.59	0.00	0.00	0.19	0.20	0.00
Albemarle	0.82	0.00	0.94	0.00	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.55	0.00	0.31	0.00	0.00	0.00	0.62	0.00
Catawba	1.43	0.34	0.32	0.68	0.00	0.00	0.00	0.00	0.36	0.00	0.00	0.34	0.00	0.00	0.00	0.34	0.72	0.34	0.32	0.00	0.36	0.00	0.00	0.00
Centerpoint	0.00	0.62	0.54	0.92	0.00	0.00	0.00	0.00	0.00	0.27	0.09	0.08	0.00	0.00	0.00	0.50	0.00	0.18	0.27	0.33	0.00	0.18	0.18	0.00
Crossroads	1.49	1.31	1.58	3.25	0.21	0.22	0.00	0.41	0.00	0.22	0.00	0.20	0.00	0.00	0.00	0.00	0.85	0.44	0.45	1.02	0.42	0.44	1.13	1.62
Cumberland	2.05	2.49	2.64	1.48	0.00	0.00	0.00	0.00	0.23	0.68	0.22	0.21	0.23	0.23	0.00	0.00	1.37	1.36	1.76	1.06	0.23	0.23	0.66	0.21
Durham	0.44	0.36	0.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.15	0.18	0.19	0.00	0.30	0.18	0.19	0.00	0.00	0.00	0.00	0.00
Eastpointe 1	0.20	0.10	0.42	1.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.20	0.10	0.32	0.91	0.00	0.00	0.11	0.10
Edgecombe-Nash	0.00	0.26	0.00	0.57	0.00	0.00	0.00	0.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.26	0.00	0.00	0.00	0.00	0.00	0.28
Foothills	0.51	0.40	0.24	0.49	0.00	0.00	0.00	0.10	0.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.31	0.40	0.24	0.29	0.00	0.00	0.00	0.10
Guilford	0.85	1.24	0.40	0.57	0.12	0.00	0.06	0.06	0.00	0.12	0.00	0.06	0.00	0.00	0.00	0.00	0.55	0.71	0.23	0.13	0.18	0.41	0.11	0.32
Johnston	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Lee-Harnett	0.23	0.00	0.00	0.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.23	0.00	0.00	0.21	0.00	0.00	0.00	0.00
Mecklenburg	0.24	0.07	0.31	0.17	0.00	0.00	0.06	0.00	0.03	0.03	0.00	0.02	0.00	0.00	0.00	0.00	0.14	0.03	0.09	0.10	0.07	0.00	0.15	0.05
Neuse	0.21	0.38	0.56	0.57	0.00	0.00	0.00	0.00	0.00	0.38	0.00	0.00	0.00	0.00	0.00	0.00	0.21	0.00	0.56	0.57	0.00	0.00	0.00	0.00
New River	0.81	1.65	0.63	0.82	0.41	0.62	0.00	0.00	0.20	0.00	0.21	0.00	0.00	0.00	0.00	0.00	0.20	0.62	0.00	0.21	0.00	0.41	0.42	0.62
Onslow	0.00	0.92	0.00	0.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.69	0.00	0.20	0.00	0.23	0.00	0.00
OPC	0.76	0.57	0.70	0.16	0.19	0.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.38	0.38	0.52	0.16	0.19	0.00	0.17	0.00
Pathways	2.45	1.35	1.10	0.41	0.22	0.11	0.00	0.00	0.11	0.11	0.11	0.00	0.22	0.00	0.00	0.10	1.56	1.01	0.88	0.31	0.33	0.11	0.11	0.00
Piedmont 1 & 2	0.38	0.41	0.14	0.36	0.00	0.00	0.00	0.00	0.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.25	0.14	0.14	0.36	0.00	0.27	0.00	0.00
Pitt	0.96	2.11	2.09	0.48	0.00	0.00	0.00	0.24	0.24	0.47	0.23	0.00	0.24	0.00	0.00	0.00	0.48	1.64	1.16	0.24	0.00	0.00	0.70	0.00
Riverstone	0.00	0.26	0.00	2.30	0.00	0.00	0.00	0.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.26	0.00	2.04	0.00	0.00	0.00	0.00
Roanoke-Chowan	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Rockingham	0.00	0.00	0.79	3.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.88	0.00	0.00	0.39	0.88	0.00	0.00	0.39	1.32
Sandhills 1	1.45	0.47	2.19	1.09	0.00	0.00	0.12	0.00	0.00	0.12	0.00	0.18	0.00	0.00	0.12	0.00	1.09	0.35	0.81	0.54	0.36	0.00	1.15	0.36
Smoky Mountain	0.81	0.00	0.15	0.13	0.00	0.00	0.00	0.00	0.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.32	0.00	0.15	0.13	0.32	0.00	0.00	0.00
Southeastern Center	0.58	0.87	1.45	0.61	0.00	0.00	0.15	0.00	0.00	0.43	0.00	0.15	0.15	0.14	0.00	0.00	0.29	0.29	1.16	0.46	0.15	0.00	0.15	0.00
Southeastern Regional	0.23	0.00	0.23	0.60	0.00	0.00	0.00	0.10	0.00	0.00	0.00	0.10	0.00	0.00	0.00	0.00	0.23	0.00	0.23	0.40	0.00	0.00	0.00	0.00
Tideland	0.00	0.00	0.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.19	0.00	0.00	0.00	0.00	0.00
VGFW	0.50	0.25	0.25	0.23	0.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.25	0.00	0.00	0.25	0.00	0.25	0.23	0.00	0.00	0.00	0.00
Wake	0.39	1.29	0.76	0.71	0.00	1.06	0.11	0.20	0.00	0.00	0.11	0.00	0.13	0.00	0.00	0.00	0.26	0.12	0.33	0.41	0.00	0.12	0.22	0.10
Western Highlands 1 & 2	0.11	0.55	0.44	0.65	0.11	0.00	0.22	0.11	0.00	0.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.33	0.00	0.55	0.00	0.00	0.22	0.00
Wilson-Greene	0.00	0.53	0.17	0.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.18	0.17	0.16	0.00	0.36	0.00	0.00
All AA/CPs	0.54	0.57	0.50	0.57	0.05	0.07	0.00	0.04	0.04	0.40	0.00	0.04	0.00	0.00	0.04	0.04	0.04	0.00	0.00	0.00	0.00	0.40	0.40	0.40
Reporting	0.54	0.57	0.59	0.57	0.05	0.07	0.03	0.04	0.04	0.10	0.03	0.04	0.03	0.02	0.01	0.04	0.34	0.29	0.33	0.32	0.08	0.10	0.19	0.12
Minimum	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Median	0.39	0.39	0.40	0.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.25	0.18	0.24	0.23	0.00	0.00	0.11	0.00
Maximum	2.45	2.49	2.64	3.25	0.41	1.06	0.22	0.41	0.36	0.68	0.23	0.34	0.24	0.25	0.19	0.88	1.56	1.64	1.76	2.04	0.42	0.44	1.15	1.62
·,					•																			

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table 6 - Quarterly Numbers of Reported Allegations of Abuse, Neglect or Exploitation of Consumers

This table summarizes the numbers of reported allegations of abuse, neglect, or exploitation of consumers.

Abuse represents more than two-thirds of the reported allegations. Some reports may involve allegations of multiple types.

					Repo	rted All	egation	s of Abu	ıse, Neç	glect, or	Exploit	ation				
	Total	•	ed Alleg licated)	ations		Alleged	l Abuse			Alleged	Neglec	t	Al	leged E	xploitati	on
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	8	4	13	3	8	4	13	3	0	0	0	0	0	0	0	0
Albemarle	1	1	0	1	1	1	0	1	0	0	0	0	0	0	0	0
Catawba	0	1	1	2	0	1	1	2	0	0	0	0	0	0	0	0
Centerpoint	1	5	8	6	1	3	6	5	0	2	2	1	0	0	0	0
Crossroads	1	2	3	2	1	1	0	1	0	1	3	3	0	0	0	1
Cumberland	17	36	27	26	17	29	17	17	0	6	8	6	1	1	2	3
Durham	3	1	11	1	2	0	6	1	1	1	4	0	0	0	1	0
Eastpointe <sup>1</sup>	20	27	37	56	19	27	32	52	1	0	3	4	0	0	2	2
Edgecombe-Nash	5	5	8	7	4	5	5	5	1	0	3	2	0	0	0	0
Foothills	0	0	3	7	1	2	3	6	1	0	0	1	0	0	0	0
Guilford	5	6	10	7	4	4	5	4	1	2	5	3	0	0	0	0
Johnston	0	1	2	2	0	2	1	2	0	0	0	0	0	0	1	0
Lee-Harnett	0	2	2	2	0	0	2	1	0	0	0	1	0	0	0	0
Mecklenburg	32	35	24	23	23	25	19	18	6	10	3	4	3	0	2	3
Neuse	0	1	3	6	0	1	3	6	0	1	2	1	0	0	1	0
New River	3	6	3	7	0	3	2	4	3	3	0	3	0	0	1	0
Onslow	8	2	11	2	3	0	5	2	5	2	6	0	0	0	0	0
OPC	3	1	1	2	1	1	1	2	2	0	0	0	0	0	0	0
Pathways	29	17	21	15	16	8	12	9	11	7	8	5	2	2	1	1
Piedmont 1 & 2	19	16	25	22	15	14	19	16	4	1	6	6	0	1	0	0
Pitt	4	3	7	2	4	2	6	1	0	1	1	1	0	0	0	0
Riverstone	3	0	5	1	0	0	2	1	3	0	3	0	0	0	0	0
Roanoke-Chowan	3	6	8	7	2	4	6	4	1	2	2	3	0	0	0	0
Rockingham	3	0	0	1	2	0	0	1	1	0	0	0	0	0	0	0
Sandhills <sup>1</sup>	22	21	25	32	15	11	22	20	5	10	3	11	2	0	0	1
Smoky Mountain	1	0	0	1	1	0	0	1	0	0	0	0	1	0	0	0
Southeastern Center	8	23	12	13	3	11	6	9	3	2	6	2	2	11	0	2
Southeastern Regional	0	2	9	3	0	2	4	3	0	0	4	0	0	0	1	0
Tideland	2	1	2	2	1	1	2	2	1	0	0	0	0	0	0	0
VGFW	1	0	1	6	0	0	1	4	1	0	0	1	0	0	0	1
Wake	6	1	4	7	6	1	0	7	0	0	3	0	0	0	1	0
Western Highlands 1 & 2	7	7	7	3	5	5	6	2	2	2	1	1	1	0	0	0
Wilson-Greene	2	2	1	1	1	2	1	1	2	0	0	0	0	0	0	0
All AA/CPs Reporting	217	235	294	278	156	170	208	213	55	53	76	59	12	15	13	14

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table 7 - Quarterly Rates of Reported Allegations of Abuse, Neglect, or Exploitation per 1,000 Active Consumers

This table summarizes the rates of reported allegations of abuse, neglect, or exploitation per 1,000 active consumers. These rates offer a better comparison measure than the actual numbers due to the significant variation in program size.

The average rate of reported allegations of abuse, neglect, or exploitation was 1.11 per 1,000 active caseload in the fourth quarter. The variation in rates by area program may be more reflective of differences in reporting.

				Reporte	ed Alleg	ations o	f Abuse	, Neglec	t, or Ex	ploitatio	n per 1,	000 Acti	ve Cons	sumers		
	Total	-	ed Alleg olicated)	ations		Alleged	Abuse			Alleged	Neglect		Al	leged Ex	xploitati	on
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	1.55	0.78	2.54	0.51	1.55	0.78	2.54	0.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Albemarle	0.27	0.30	0.00	0.32	0.27	0.30	0.00	0.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Catawba	0.00	0.34	0.32	0.68	0.00	0.34	0.32	0.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Centerpoint	0.08	0.45	0.72	0.50	80.0	0.27	0.54	0.42	0.00	0.18	0.18	0.08	0.00	0.00	0.00	0.00
Crossroads	0.21	0.44	0.68	0.41	0.21	0.22	0.00	0.20	0.00	0.22	0.68	0.61	0.00	0.00	0.00	0.20
Cumberland	3.87	8.15	5.94	5.50	3.87	6.56	3.74	3.60	0.00	1.36	1.76	1.27	0.23	0.23	0.44	0.63
Durham	0.44	0.18	2.06	0.18	0.30	0.00	1.12	0.18	0.15	0.18	0.75	0.00	0.00	0.00	0.19	0.00
Eastpointe 1	2.00	2.82	3.92	5.68	1.90	2.82	3.39	5.27	0.10	0.00	0.32	0.41	0.00	0.00	0.21	0.20
Edgecombe-Nash	1.17	1.28	2.05	1.99	0.94	1.28	1.28	1.42	0.23	0.00	0.77	0.57	0.00	0.00	0.00	0.00
Foothills	0.00	0.00	0.36	0.69	0.10	0.20	0.36	0.59	0.10	0.00	0.00	0.10	0.00	0.00	0.00	0.00
Guilford	0.30	0.35	0.57	0.44	0.24	0.24	0.29	0.25	0.06	0.12	0.29	0.19	0.00	0.00	0.00	0.00
Johnston	0.00	0.33	0.62	0.59	0.00	0.67	0.31	0.59	0.00	0.00	0.00	0.00	0.00	0.00	0.31	0.00
Lee-Harnett	0.00	0.47	0.46	0.42	0.00	0.00	0.46	0.21	0.00	0.00	0.00	0.21	0.00	0.00	0.00	0.00
Mecklenburg	1.12	1.15	0.73	0.57	0.80	0.82	0.58	0.45	0.21	0.33	0.09	0.10	0.10	0.00	0.06	0.07
Neuse	0.00	0.19	0.56	1.14	0.00	0.19	0.56	1.14	0.00	0.19	0.37	0.19	0.00	0.00	0.19	0.00
New River	0.61	1.24	0.63	1.44	0.00	0.62	0.42	0.82	0.61	0.62	0.00	0.62	0.00	0.00	0.21	0.00
Onslow	1.88	0.46	2.43	0.40	0.71	0.00	1.11	0.40	1.18	0.46	1.33	0.00	0.00	0.00	0.00	0.00
OPC	0.57	0.19	0.17	0.33	0.19	0.19	0.17	0.33	0.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Pathways	3.23	1.92	2.31	1.54	1.78	0.90	1.32	0.92	1.23	0.79	0.88	0.51	0.22	0.23	0.11	0.10
Piedmont 1 & 2	2.42	2.17	3.54	2.65	1.91	1.90	2.69	1.93	0.51	0.14	0.85	0.72	0.00	0.14	0.00	0.00
Pitt	0.96	0.70	1.63	0.48	0.96	0.47	1.39	0.24	0.00	0.23	0.23	0.24	0.00	0.00	0.00	0.00
Riverstone	0.80	0.00	1.34	0.26	0.00	0.00	0.54	0.26	0.80	0.00	0.80	0.00	0.00	0.00	0.00	0.00
Roanoke-Chowan	0.83	1.59	2.01	1.64	0.55	1.06	1.51	0.94	0.28	0.53	0.50	0.70	0.00	0.00	0.00	0.00
Rockingham	1.22	0.00	0.00	0.44	0.81	0.00	0.00	0.44	0.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Sandhills <sup>1</sup>	2.66	2.48	2.88	2.90	1.82	1.30	2.54	1.81	0.61	1.18	0.35	1.00	0.24	0.00	0.00	0.09
Smoky Mountain	0.16	0.00	0.00	0.13	0.16	0.00	0.00	0.13	0.00	0.00	0.00	0.00	0.16	0.00	0.00	0.00
Southeastern Center	1.16	3.32	1.74	1.99	0.44	1.59	0.87	1.38	0.44	0.29	0.87	0.31	0.29	1.59	0.00	0.31
Southeastern Regional	0.00	0.23	1.02	0.30	0.00	0.23	0.46	0.30	0.00	0.00	0.46	0.00	0.00	0.00	0.11	0.00
Tideland	0.36	0.19	0.37	0.35	0.18	0.19	0.37	0.35	0.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VGFW	0.25	0.00	0.25	1.37	0.00	0.00	0.25	0.91	0.25	0.00	0.00	0.23	0.00	0.00	0.00	0.23
Wake	0.78	0.12	0.44	0.71	0.78	0.12	0.00	0.71	0.00	0.00	0.33	0.00	0.00	0.00	0.11	0.00
Western Highlands 1 & 2	0.75	0.77	0.77	0.33	0.53	0.55	0.66	0.22	0.21	0.22	0.11	0.11	0.11	0.00	0.00	0.00
Wilson-Greene	0.36	0.36	0.17	0.16	0.18	0.36	0.17	0.16	0.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All AA/CPs	0.05	4.00	4.07	4 44	0.00	0.74	0.00	0.05	0.24	0.00	0.22	0.04	0.05	0.07	0.00	0.00
Reporting	0.95	1.03	1.27	1.11	0.68	0.74	0.90	0.85	0.24	0.23	0.33	0.24	0.05	0.07	0.06	0.06
Minimum	0.00	0.00	0.00	0.13	0.00	0.00	0.00	0.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Median	0.61	0.44	0.72	0.51	0.27	0.30	0.54	0.45	0.15	0.00	0.23	0.10	0.00	0.00	0.00	0.00
Maximum	3.87	8.15	5.94	5.68	3.87	6.56	3.74	5.27	1.23	1.36	1.76	1.27	0.29	1.59	0.44	0.63
4																

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table 8 - Quarterly Numbers of Reported Injuries Requiring Treatment by a Physician

This table summarizes the numbers of reported injuries to consumers requiring treatment by a physican.

Two-thirds of the injuries reported fell into the "other" category. Self-injury was the next most common category representing 17 percent of the total in the fourth quarter.

Total Reported Injuries   Injury Four Use Suicide   Hazardus Substance   Self-Injury   Self-Injury								Num	ber o	f Repo	orted	Injurie	es Rec	quirin	g Trea	tmen	t by a	Phys	ician						
National Properties   National Properties		T-4-1	D	مدا است		Injui	y Due													aused	by	Ot	her Ac	cident	or
Alamance-Caswell   2		Total	Kepoi	rtea in	juries		Atte	mpt		Haza	rdous	Subst	tance		Seit-i	njury		A	nothe	r Clier	nt		Inj	ury	
Alamance-Caswell																			-						4th
Albemarle																									Qtr
Caterpoint														•		_				•					8
Centerpoint   5   13   16   16   0   0   0   0   0   0   0   0   0													_			•								_	2
Crossroads							_	_		_ ·		_	_	_	_			_		_		•			14
Cumberland						_																			15
Durham							•					_	_				•	_					-		6
Eastpointe 1 6 12 27 16 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Cumberland									·	0				<u> </u>		-		•		•				7
Edgecombe-Nash	Durham	_					_					0	0			_		_	_			6			12
Foothills         25         28         7         7         0         3         3         0         0         0         0         2         1         1         0         0         0         0         0         2         1         1         0 <th< th=""><th>Eastpointe 1</th><th>6</th><th></th><th>27</th><th></th><th>0</th><th>0</th><th>0</th><th>0</th><th>0</th><th>0</th><th>0</th><th>0</th><th>2</th><th>0</th><th>3</th><th>3</th><th>0</th><th>3</th><th>2</th><th>3</th><th>4</th><th>9</th><th>22</th><th>10</th></th<>	Eastpointe 1	6		27		0	0	0	0	0	0	0	0	2	0	3	3	0	3	2	3	4	9	22	10
Guilford	Edgecombe-Nash	13	15	10	10	0	0	3	0	0	0	0	0	3	8	1	3	1	7	0	1	9	•	6	6
Doinston   2	Foothills	25	28	7	7	0	3	3	0	0	0	0	0	2	1	1	0	0	0	0	0	23	24	3	7
Lee-Harnett	Guilford	18	19	7	13	3	3	2	1	0	0	0	0	3	6	0	2	0	0	0	0	12	10	5	10
Mecklenburg	Johnston	2	6	2	0	2	3	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	3	1	0
Neuse   9	Lee-Harnett	0	2	1	2	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	1	1
New River	Mecklenburg	112	76	26	55	5	8	2	3	1	0	0	2	31	18	6	14	19	5	1	2	56	45	17	34
Onsiow         7         6         23         4         0         0         0         0         1         0         0         0         3         3         1         1         1         8         0         6         1         12           OPC         3         8         8         12         0         2         1         4         0         0         0         0         2         1         1         0         0         0         1         1         1         8         0         6         1         12           Pathways         81         48         31         35         6         3         5         4         1         0         0         0         16         6         2         9         13         7         4         5         45         32         20           Piedmont 1&2         78         39         58         70         34         0         3         2         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0 <th>Neuse</th> <th>9</th> <th>1</th> <th>5</th> <th>8</th> <th>1</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>2</th> <th>0</th> <th>1</th> <th>0</th> <th>1</th> <th>0</th> <th>0</th> <th>1</th> <th>5</th> <th>1</th> <th>4</th> <th>7</th>	Neuse	9	1	5	8	1	0	0	0	0	0	0	0	2	0	1	0	1	0	0	1	5	1	4	7
OPC         3         8         8         12         0         2         1         4         0         0         0         0         2         1         1         0         0         0         1         1         1         5         5           Pathways         81         48         31         35         6         3         5         4         1         0         0         0         16         6         2         9         13         7         4         5         45         32         20           Piedmont <sup>182</sup> 78         39         58         70         34         0         3         2         0         0         0         0         4         5         12         4         4         2         3         6         36         32         40           Pitt         3         6         0         8         0 </th <th>New River</th> <th>7</th> <th>11</th> <th>9</th> <th>13</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>0</th> <th>2</th> <th>2</th> <th>2</th> <th>0</th> <th>1</th> <th>0</th> <th>1</th> <th>7</th> <th>8</th> <th>7</th> <th>10</th>	New River	7	11	9	13	0	0	0	0	0	0	0	0	0	2	2	2	0	1	0	1	7	8	7	10
Pathways         81         48         31         35         6         3         5         4         1         0         0         0         16         6         2         9         13         7         4         5         45         32         20           Piedmont 1 & 2         78         39         58         70         34         0         3         2         0         0         0         0         4         5         12         4         4         2         3         6         36         32         40           Pitt         3         6         0         8         0	Onslow	7	6	23	4	0	0	0	0	0	1	0	0	0	3	3	1	1	1	8	0	6	1	12	3
Piedmont <sup>1 &amp; 2</sup> 78         39         58         70         34         0         3         2         0         0         0         0         4         5         12         4         4         2         3         6         36         36         32         40           Pitt         3         6         0         8         0	OPC	3	8	8	12	0	2	1	4	0	0	0	0	2	1	1	0	0	0	1	1	1	5	5	7
Pitt         3         6         0         8         0	Pathways	81	48	31	35	6	3	5	4	1	0	0	0	16	6	2	9	13	7	4	5	45	32	20	17
Riverstone         3         0         1         4         0         0         0         1         0	Piedmont <sup>1 &amp; 2</sup>	78	39	58	70	34	0	3	2	0	0	0	0	4	5	12	4	4	2	3	6	36	32	40	58
Roanoke-Chowan         0         3         13         9         0		3	6	0	8	0	0	0	0	0	0	0	0	1	0	0	2	1	1	0	0	1	5	0	6
Rockingham         1         1         0         1         0	Riverstone	3	0	1	4	0	0	0	1	0	0	0	0	2	0	0	0	1	0	0	0	0	0	1	3
Sandhills 1         9         13         11         35         0         1         2         2         0         0         0         0         1         4         0         7         0         1         1         2         8         7         8           Smoky Mountain         2         1         2         2         0<	Roanoke-Chowan	0	3	13	9	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	3	11	9
Smoky Mountain         2         1         2         2         0	Rockingham	1	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	1
Smoky Mountain         2         1         2         2         0	Sandhills 1	9	13	11	35	0	1	2	2	0	0	0	0	1	4	0	7	0	1	1	2	8	7	8	24
Southeastern Center         29         27         22         15         2         0         1         1         0         0         0         1         0         4         2         0         5         0         0         2         22         23         19           Southeastern Regional         0         3         0         6         0         0         0         1         0<		2	1	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	1	2	2
Southeastern Regional         0         3         0         6         0         0         0         1         0			27			2	0	1	1	0	0	0	1	0	4	2	0	5	0	0	2		23		11
Tideland         2         1         4         5         0<							0	0	1	0			0	0	0		4		0					_	1
VGFW         4         1         6         13         0 <th></th> <th></th> <th>1</th> <th></th> <th></th> <th>0</th> <th>0</th> <th></th> <th>0</th> <th>0</th> <th></th> <th>0</th> <th>0</th> <th>0</th> <th></th> <th>0</th> <th>2</th> <th>1</th> <th>0</th> <th>0</th> <th>1</th> <th>-</th> <th>-</th> <th>4</th> <th>2</th>			1			0	0		0	0		0	0	0		0	2	1	0	0	1	-	-	4	2
Wake         25         28         26         25         6         3         6         5         0         0         0         0         2         0         2         1         0         0         3         18         23         20           Western Highlands 1&2         13         5         19         17         0         0         2         3         1         0         0         0         0         2         6         1         0         11         5         14			1	6		0	0	_		0		0	0	0	0	1		1	0		1	3	1	3	11
Western Highlands 1 & 2   13   5   19   17   0   0   2   3   1   0   0   0   0   0   2   6   1   0   1   0   11   5   14	_		28	_			-		_				-		_	0	2	1					23		15
							_					_		0				1							8
	Wilson-Greene	3	6	4	10	0	0	0	0	0	1	0	0	1	1	0	2	0	3	0	2	2	1	4	6
All AA/CPs	All AA/CPs	<b></b>	400	440	4-0	00	0.0	00	66	_	_	_		0.0		0.1	0.1		0-	٠.	0.0	0.10	000	000	000
Reporting   514   426   416   478   60   30   39   28   3   4   0   3   86   65   61   81   55   37   34   33   310   290   282		514	426	416	478	60	30	39	28	3	4	0	3	86	65	61	81	55	37	34	33	310	290	282	333

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5. <sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table 9 - Quarterly Rate of Reported Injuries Requiring Treatment by a Physician per 1,000 Active Consumers

This table summarizes the rate of reported injuries to consumers per 1,000 active consumers. These rates offer a better comparison measure than the actual numbers due to the significant variation in program size.

The average rate of injuries per 1,000 active consumers was 1.91 for reporting programs statewide in the fourth quarter. There is substantial variation by local program.

			Ra	te of	Repoi	ted In	juries	to Co	onsun	ners F	Requir	ing Tı	reatm	ent by	a Ph	ysicia	n per	1,000	Activ	e Cor	isume	ers		
	Total	Repor	ted In	juries	Injur	y Due Atte	to Su mpt	icide	-	ry fron				Self-	Injury		•	ury Ca Inothe		•	Otl		cident ury	or
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	0.39	2.14	2.35	1.68	0.00	0.00	0.20	0.00	0.00	0.00	0.00	0.00	0.19	0.00	0.00	0.34	0.00	0.39	0.20	0.00	0.19	1.75	1.96	1.35
Albemarle	2.74	0.00	0.31	1.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.65	0.00	0.31	0.64	0.27	0.00	0.00	0.00	0.82	0.00	0.00	0.64
Catawba	2.51	4.36	2.89	4.79	0.00	0.00	0.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.51	4.36	1.93	4.79
Centerpoint	0.38	1.16	1.43	1.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.09	0.09	0.00	0.08	0.00	0.00	0.08	0.30	1.07	1.34	1.25
Crossroads	2.55	1.31	4.73	2.64	0.00	0.22	0.00	0.00	0.00	0.00	0.00	0.00	0.42	0.22	2.93	1.42	0.00	0.00	0.45	0.00	2.12	0.87	1.35	1.22
Cumberland	3.19	2.94	3.30	2.96	0.23	0.68	0.66	0.21	0.00	0.00	0.00	0.00	0.91	0.23	1.10	1.06	0.68	0.91	0.44	0.21	1.37	1.13	1.10	1.48
Durham	1.33	0.72	3.74	2.18	0.00	0.00	0.37	0.00	0.00	0.18	0.00	0.00	0.44	0.18	0.56	0.00	0.00	0.00	0.75	0.00	0.89	0.36	2.06	2.18
Eastpointe 1	0.60	1.25	2.86	1.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.20	0.00	0.32	0.30	0.00	0.31	0.21	0.30	0.40	0.94	2.33	1.01
Edgecombe-Nash	3.05	3.85	2.57	2.84	0.00	0.00	0.77	0.00	0.00	0.00	0.00	0.00	0.70	2.05	0.26	0.85	0.23	1.80	0.00	0.28	2.11	0.00	1.54	1.70
Foothills	2.55	2.81	0.84	0.69	0.00	0.30	0.36	0.00	0.00	0.00	0.00	0.00	0.20	0.10	0.12	0.00	0.00	0.00	0.00	0.00	2.34	2.41	0.36	0.69
Guilford	1.09	1.12	0.40	0.82	0.18	0.18	0.11	0.06	0.00	0.00	0.00	0.00	0.18	0.35	0.00	0.13	0.00	0.00	0.00	0.00	0.73	0.59	0.29	0.63
Johnston	0.67	2.00	0.62	0.00	0.67	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.31	0.00	0.00	1.00	0.31	0.00
Lee-Harnett	0.00	0.47	0.23	0.42	0.00	0.00	0.00	0.00	0.00	0.23	0.00	0.00	0.00	0.00	0.00	0.21	0.00	0.00	0.00	0.00	0.00	0.23	0.23	0.21
Mecklenburg	3.91	2.50	0.80	1.37	0.17	0.26	0.06	0.07	0.03	0.00	0.00	0.05	1.08	0.59	0.18	0.35	0.66	0.16	0.03	0.05	1.95	1.48	0.52	0.85
Neuse	1.89	0.19	0.93	1.51	0.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.42	0.00	0.19	0.00	0.21	0.00	0.00	0.19	1.05	0.19	0.74	1.32
New River	1.42	2.27	1.88	2.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.41	0.42	0.41	0.00	0.21	0.00	0.21	1.42	1.65	1.46	2.06
Onslow	1.65	1.38	5.09	0.80	0.00	0.00	0.00	0.00	0.00	0.23	0.00	0.00	0.00	0.69	0.66	0.20	0.24	0.23	1.77	0.00	1.41	0.23	2.65	0.60
OPC	0.57	1.51	1.40	1.96	0.00	0.38	0.17	0.65	0.00	0.00	0.00	0.00	0.38	0.19	0.17	0.00	0.00	0.00	0.17	0.16	0.19	0.95	0.87	1.14
Pathways	9.02	5.41	3.41	3.59	0.67	0.34	0.55	0.41	0.11	0.00	0.00	0.00	1.78	0.68	0.22	0.92	1.45	0.79	0.44	0.51	5.01	3.61	2.20	1.74
Piedmont 1 & 2	9.94	5.28	8.20	8.44	4.33	0.00	0.42	0.24	0.00	0.00	0.00	0.00	0.51	0.68	1.70	0.48	0.51	0.27	0.42	0.72	4.59	4.34	5.66	6.99
Pitt	0.72	1.41	0.00	1.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.24	0.00	0.00	0.48	0.24	0.23	0.00	0.00	0.24	1.17	0.00	1.44
Riverstone	0.80	0.00	0.27	1.02	0.00	0.00	0.00	0.26	0.00	0.00	0.00	0.00	0.53	0.00	0.00	0.00	0.27	0.00	0.00	0.00	0.00	0.00	0.27	0.77
Roanoke-Chowan	0.00	0.80	3.26	2.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.25	0.00	0.00	0.00	0.25	0.00	0.00	0.80	2.76	2.11
Rockingham	0.41	0.40	0.00	0.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.41	0.40	0.00	0.44
Sandhills 1	1.09	1.53	1.27	3.17	0.00	0.12	0.23	0.18	0.00	0.00	0.00	0.00	0.12	0.47	0.00	0.63	0.00	0.12	0.12	0.18	0.97	0.83	0.92	2.17
Smoky Mountain	0.32	0.15	0.29	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.32	0.15	0.29	0.27
Southeastern Center	4.22	3.89	3.19	2.30	0.29	0.00	0.15	0.15	0.00	0.00	0.00	0.15	0.00	0.58	0.29	0.00	0.73	0.00	0.00	0.31	3.20	3.32	2.76	1.69
Southeastern Regional	0.00	0.35	0.00	0.60	0.00	0.00	0.00	0.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.40	0.00	0.00	0.00	0.00	0.00	0.35	0.00	0.10
Tideland	0.36	0.19	0.75	0.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.35	0.18	0.00	0.00	0.18	0.18	0.19	0.75	0.35
VGFW	0.99	0.25	1.53	2.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.25	0.23	0.25	0.00	0.51	0.23	0.74	0.25	0.76	2.52
Wake	3.27	3.29	2.83	2.55	0.78	0.35	0.65	0.51	0.00	0.00	0.00	0.00	0.00	0.24	0.00	0.20	0.13	0.00	0.00	0.31	2.35	2.70	2.18	1.53
Western Highlands 1 & 2	1.39	0.55	2.09	1.85	0.00	0.00	0.22	0.33	0.11	0.00	0.00	0.00	0.00	0.00	0.22	0.65	0.11	0.00	0.11	0.00	1.18	0.55	1.54	0.87
Wilson-Greene	0.55	1.07	0.69	1.65	0.00	0.00	0.00	0.00	0.00	0.18	0.00	0.00	0.18	0.18	0.00	0.33	0.00	0.53	0.00	0.33	0.36	0.18	0.69	0.99
All AA/CPs																								
Reporting	2.24	1.86	1.79	1.91	0.26	0.13	0.17	0.11	0.01	0.02	0.00	0.01	0.38	0.28	0.26	0.32	0.24	0.16	0.15	0.13	1.35	1.27	1.22	1.33
Minimum	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Median	1.09	1.31	1.43	1.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.18	0.09	0.17	0.23	0.00	0.00	0.00	0.00	0.82	0.83	0.92	1.22
Maximum	9.94	5.41	8.20	8.44	4.33	1.00	0.96	0.65	0.11	0.23	0.00	0.15	1.78	2.05	2.93	1.42	1.45	1.80	1.77	0.72	5.01	4.36	5.66	6.99
	0.0	J	JJ	J			0.00	0.00	<u> </u>	0.20	5.00	55								J	0.01		0.00	5.55

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# **Table 10 - Quarterly Numbers of Reported Medication Errors**

This table summarizes the numbers of reported medication errors.

More than three-fourths of the medication errors reported were due to a missed dose. The total number of errors being reported is notably up. However, a single client missing multiple doses repeatedly can produce large swings in numbers.

							Repor	ted Med	ication	Errors						
	Tot	al Medic Repo	ation Err orted	ors	Misse	ed Dose o	of Prescr			g Dosage	Admini	stered	Wrong	Medicatio	on Admii	nistered
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	3	6	2	4	2	1	0	1	0	2	2	2	1	3	0	1
Albemarle	3	1	0	1	3	1	0	1	0	0	0	0	0	0	0	0
Catawba	0	20	25	49	0	17	25	46	0	2	0	3	0	1	0	0
Centerpoint	5	5	2	9	4	2	2	7	1	2	0	2	0	1	0	0
Crossroads	7	5	13	9	7	5	8	8	0	0	5	1	0	0	0	0
Cumberland	4	10	87	63	3	8	82	61	1	1	4	1	0	1	1	1
Durham	4	1	0	0	1	1	0	0	2	0	0	0	1	0	0	0
Eastpointe 1	3	6	1	7	3	5	1	7	0	1	0	0	0	0	0	0
Edgecombe-Nash	0	1	5	8	0	1	3	7	0	0	1	1	0	0	1	0
Foothills	28	23	12	21	26	23	8	14	0	0	4	7	2	0	0	0
Guilford	0	3	5	3	0	3	2	3	0	0	2	0	0	0	1	0
Johnston	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lee-Harnett	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mecklenburg	19	45	17	17	14	30	12	9	4	10	5	5	1	5	0	3
Neuse	2	2	1	7	2	1	1	7	0	1	0	0	0	0	0	0
New River	5	2	7	7	5	2	3	1	0	0	4	5	0	0	0	1
Onslow	1	0	5	2	1	0	4	2	0	0	1	0	0	0	0	0
OPC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pathways	27	14	12	4	23	12	6	3	2	2	6	1	2	0	0	0
Piedmont 1 & 2	5	11	1	4	3	8	1	0	2	3	0	2	0	0	0	2
Pitt	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Riverstone	2	2	1	0	1	1	1	0	0	1	0	0	1	0	0	0
Roanoke-Chowan	1	2	1	4	0	1	1	2	1	1	0	2	0	0	0	0
Rockingham	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Sandhills <sup>1</sup>	3	8	4	2	3	7	4	1	0	1	0	0	0	0	0	1
Smoky Mountain	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Southeastern Center	30	27	7	12	8	19	4	8	14	6	3	3	8	2	0	1
Southeastern Regional	4	0	6	6	0	0	5	6	4	0	1	0	0	0	0	0
Tideland	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1
VGFW	0	1	7	2	0	1	4	2	0	0	2	0	0	0	1	0
Wake	3	18	21	39	0	18	19	38	0	0	2	1	3	0	0	0
Western Highlands 1 & 2	3	1	9	1	2	0	3	1	1	1	6	0	0	0	0	0
Wilson-Greene	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0
All AA/CPs Reporting	162	216	252	282	111	169	199	235	32	34	48	36	19	13	5	11

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table 11 - Quarterly Rate of Reported Medication Errors per 1,000 Active Consumers

This table summarizes the rate of reported medication errors per 1,000 active consumers. These rates offer a better comparison measure than the actual numbers due to the significant variation in program size.

Based on the reported data, there were 1.13 medication errors per 1,000 active consumers in the fourth quarter higher than the prior three quarters. The wide variation in rates is likely to be due in part to incomplete reporting.

	Rate of Reported Medication Errors per 1,000 Active Consumers  Total Medication Errors  Missed Dose of Prescription Wrong Dosage Administered Wrong Medication Administ															
	Tot		ation Eri orted	rors	Misse	d Dose o Medic		ription	Wrong	g Dosage	Admini	stered	Wrong I	Medicatio	on Admi	nistered
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	0.58	1.17	0.39	0.67	0.39	0.19	0.00	0.17	0.00	0.39	0.39	0.34	0.19	0.58	0.00	0.17
Albemarle	0.82	0.30	0.00	0.32	0.82	0.30	0.00	0.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Catawba	0.00	6.70	8.03	16.75	0.00	5.70	8.03	15.73	0.00	0.67	0.00	1.03	0.00	0.34	0.00	0.00
Centerpoint	0.38	0.45	0.18	0.75	0.30	0.18	0.18	0.58	0.08	0.18	0.00	0.17	0.00	0.09	0.00	0.00
Crossroads	1.49	1.09	2.93	1.83	1.49	1.09	1.80	1.62	0.00	0.00	1.13	0.20	0.00	0.00	0.00	0.00
Cumberland	0.91	2.26	19.13	13.33	0.68	1.81	18.03	12.91	0.23	0.23	0.88	0.21	0.00	0.23	0.22	0.21
Durham	0.59	0.18	0.00	0.00	0.15	0.18	0.00	0.00	0.30	0.00	0.00	0.00	0.15	0.00	0.00	0.00
Eastpointe 1	0.30	0.63	0.11	0.71	0.30	0.52	0.11	0.71	0.00	0.10	0.00	0.00	0.00	0.00	0.00	0.00
Edgecombe-Nash	0.00	0.26	1.28	2.27	0.00	0.26	0.77	1.99	0.00	0.00	0.26	0.28	0.00	0.00	0.26	0.00
Foothills	2.85	2.31	1.44	2.06	2.65	2.31	0.96	1.37	0.00	0.00	0.48	0.69	0.20	0.00	0.00	0.00
Guilford	0.00	0.18	0.29	0.19	0.00	0.18	0.11	0.19	0.00	0.00	0.11	0.00	0.00	0.00	0.06	0.00
Johnston	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Lee-Harnett	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Mecklenburg	0.66	1.48	0.52	0.42	0.49	0.99	0.37	0.22	0.14	0.33	0.15	0.12	0.03	0.16	0.00	0.07
Neuse	0.42	0.38	0.19	1.32	0.42	0.19	0.19	1.32	0.00	0.19	0.00	0.00	0.00	0.00	0.00	0.00
New River	1.02	0.41	1.46	1.44	1.02	0.41	0.63	0.21	0.00	0.00	0.83	1.03	0.00	0.00	0.00	0.21
Onslow	0.24	0.00	1.11	0.40	0.24	0.00	0.88	0.40	0.00	0.00	0.22	0.00	0.00	0.00	0.00	0.00
OPC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Pathways	3.01	1.58	1.32	0.41	2.56	1.35	0.66	0.31	0.22	0.23	0.66	0.10	0.22	0.00	0.00	0.00
Piedmont 1 & 2	0.64	1.49	0.14	0.48	0.38	1.08	0.14	0.00	0.25	0.41	0.00	0.24	0.00	0.00	0.00	0.24
Pitt	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Riverstone	0.53	0.53	0.27	0.00	0.27	0.26	0.27	0.00	0.00	0.26	0.00	0.00	0.27	0.00	0.00	0.00
Roanoke-Chowan	0.28	0.53	0.25	0.94	0.00	0.27	0.25	0.47	0.28	0.27	0.00	0.47	0.00	0.00	0.00	0.00
Rockingham	0.00	0.40	0.00	0.00	0.00	0.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Sandhills 1	0.36	0.94	0.46	0.18	0.36	0.83	0.46	0.09	0.00	0.12	0.00	0.00	0.00	0.00	0.00	0.09
Smoky Mountain	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Southeastern Center	4.36	3.89	1.02	1.84	1.16	2.74	0.58	1.23	2.04	0.87	0.44	0.46	1.16	0.29	0.00	0.15
Southeastern Regional	0.47	0.00	0.68	0.60	0.00	0.00	0.57	0.60	0.47	0.00	0.11	0.00	0.00	0.00	0.00	0.00
Tideland	0.00	0.00	0.19	0.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.19	0.18
VGFW	0.00	0.25	1.78	0.46	0.00	0.25	1.02	0.46	0.00	0.00	0.51	0.00	0.00	0.00	0.25	0.00
Wake	0.39	2.12	2.29	3.98	0.00	2.12	2.07	3.88	0.00	0.00	0.22	0.10	0.39	0.00	0.00	0.00
Western Highlands 1 & 2	0.32	0.11	0.99	0.11	0.21	0.00	0.33	0.11	0.11	0.11	0.66	0.00	0.00	0.00	0.00	0.00
Wilson-Greene	0.00	0.18	0.00	0.00	0.00	0.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All AA/CPs Reporting	0.71	0.95	1.09	1.13	0.48	0.74	0.86	0.94	0.14	0.15	0.21	0.14	0.08	0.06	0.02	0.04
Minimum	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Median	0.36	0.40	0.29	0.42	0.21	0.26	0.25	0.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Maximum	4.36	6.70	19.13	16.75	2.65	5.70	18.03	15.73	2.04	0.87	1.13	1.03	1.16	0.58	0.26	0.24

Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# **Table 12 - Quarterly Numbers of Other Reported Critical Incidents**

This table summarizes the numbers of other types of reported critical incidents.

Client absence without notification was the most common type of these other critical incidents. There is substantial variation by program and quarter.

								Ot	her Re	ported	Critical	Incider	nts								
		ent Abse ication fo Ho			Susp		f a Clien	t from	Ехр	ulsion of Serv	a Client vices	from		of a Clie al, State,			Fire or Equipment Failure that has Resulted in Death or Injury				
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	
Alamance-Caswell	4	5	5	8	0	0	0	0	2	1	0	1	0	1	0	2	0	0	0	0	
Albemarle	6	0	1	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Catawba	0	2	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Centerpoint	0	3	1	1	1	1	3	0	0	1	1	0	3	4	3	2	0	0	0	0	
Crossroads	5	1	2	0	0	0	1	1	0	0	0	0	0	0	0	3	0	0	0	0	
Cumberland	18	24	21	16	0	0	0	1	0	0	0	0	5	2	3	6	0	0	0	0	
Durham	13	4	16	9	0	0	0	0	0	0	0	0	5	3	4	1	0	0	0	0	
Eastpointe 1	2	15	8	6	0	0	0	0	0	0	0	0	1	4	4	3	0	0	0	0	
Edgecombe-Nash	5	7	2	8	12	6	4	10	7	9	12	10	0	0	3	1	0	0	0	0	
Foothills	9	6	2	1	0	0	1	0	0	0	0	0	1	3	2	1	0	0	1	0	
Guilford	13	9	12	24	0	0	0	0	1	0	0	1	1	1	2	7	0	0	0	0	
Johnston	3	2	5	4	0	0	1	0	0	0	0	0	1	1	0	0	0	0	0	0	
Lee-Harnett	2	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	
Mecklenburg	75	85	43	37	5	4	3	2	5	2	0	0	16	12	5	8	0	0	0	0	
Neuse	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	
New River	4	3	1	2	0	0	1	0	0	1	0	0	0	1	1	0	0	0	0	0	
Onslow	0	1	0	1	0	1	0	0	0	0	0	0	3	0	0	2	0	0	0	0	
OPC	3	4	1	3	5	5	0	2	1	0	0	0	0	2	1	2	0	0	0	0	
Pathways	16	12	38	5	9	5	8	4	4	0	1	1	8	7	3	1	0	0	0	0	
Piedmont 1 & 2	38	14	14	34	11	1	1	4	0	3	4	4	1	8	3	7	0	0	0	0	
Pitt	7	8	3	5	0	0	0	1	1	1	1	0	2	2	1	0	0	0	0	0	
Riverstone	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	
Roanoke-Chowan	1	3	9	5	0	0	0	0	0	0	0	0	0	4	1	1	0	0	0	0	
Rockingham	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sandhills <sup>1</sup>	46	11	4	6	1	1	0	1	0	0	0	0	3	4	0	5	0	0	0	0	
Smoky Mountain	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	
Southeastern Center	4	11	10	8	0	1	1	0	0	0	0	1	2	0	3	2	0	0	0	0	
Southeastern Regional	2	2	6	11	0	0	0	0	0	0	0	0	0	1	0	8	0	0	0	0	
Tideland	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
VGFW	0	2	0	3	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0	
Wake	4	21	16	12	4	2	0	0	8	0	5	0	1	1	0	2	0	0	0	0	
Western Highlands 1 & 2	5	1	7	10	0	0	0	0	11	4	6	6	0	1	2	1	0	0	0	0	
Wilson-Greene	2	1	1	0	0	0	5	6	0	0	0	0	0	0	0	1	0	0	0	0	
All AA/CPs	287	258	228	234	48	27	30	32	40	22	30	24	56	63	43	68	0	0	1	0	
Reporting	201	200	220	207	70	۷,	00	02	70		00	<b>4</b> -7	00	00	70	00	J		'	J	

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table 13 - Quarterly Rate of Other Reported Critical Incidents per 1,000 Active Consumers

This table summarizes other reported critical incidents per 1,000 active consumers. These rates offer a better comparison measure than the actual numbers due to the significant variation in program size.

Client absence without notification is the most common of these other types of critical incidents with a rate of 0.93 absences per 1,000 consumers in the fourth quarter, down from the prior three quarters. All of the other types of critical incidents shown here all had statewide rates of 0.28 or less per 1,000 consumers for all four quarters. As with previous tables the wide variation in rates by local area may be more reflective of reporting differences.

	Other Reported Critical Incidents per 1,000 Active Clients  Client Absence Without Notification Suspension of a Client from Expulsion of a Client from Arrest of a Client for Violations Fire or Equipment Failure tl																			
		bsence W or more th			Susp		f a Clien vices	t from	Ехрі		a Client vices	from		of a Clie al, State,				r Equipm sulted in		
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	0.78	0.97	0.98	1.35	0.00	0.00	0.00	0.00	0.39	0.19	0.00	0.17	0.00	0.19	0.00	0.34	0.00	0.00	0.00	0.00
Albemarle	1.65	0.00	0.31	2.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Catawba	0.00	0.67	0.00	2.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Centerpoint	0.00	0.27	0.09	0.08	0.08	0.09	0.27	0.00	0.00	0.09	0.09	0.00	0.23	0.36	0.27	0.17	0.00	0.00	0.00	0.00
Crossroads	1.06	0.22	0.45	0.00	0.00	0.00	0.23	0.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.61	0.00	0.00	0.00	0.00
Cumberland	4.10	5.43	4.62	3.39	0.00	0.00	0.00	0.21	0.00	0.00	0.00	0.00	1.14	0.45	0.66	1.27	0.00	0.00	0.00	0.00
Durham	1.92	0.72	2.99	1.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.74	0.54	0.75	0.18	0.00	0.00	0.00	0.00
Eastpointe <sup>1</sup>	0.20	1.57	0.85	0.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10	0.42	0.42	0.30	0.00	0.00	0.00	0.00
Edgecombe-Nash	1.17	1.80	0.51	2.27	2.81	1.54	1.03	2.84	1.64	2.31	3.08	2.84	0.00	0.00	0.77	0.28	0.00	0.00	0.00	0.00
Foothills	0.92	0.60	0.24	0.10	0.00	0.00	0.12	0.00	0.00	0.00	0.00	0.00	0.10	0.30	0.24	0.10	0.00	0.00	0.12	0.00
Guilford	0.79	0.53	0.69	1.52	0.00	0.00	0.00	0.00	0.06	0.00	0.00	0.06	0.06	0.06	0.11	0.44	0.00	0.00	0.00	0.00
Johnston	1.00	0.67	1.56	1.17	0.00	0.00	0.31	0.00	0.00	0.00	0.00	0.00	0.33	0.33	0.00	0.00	0.00	0.00	0.00	0.00
Lee-Harnett	0.46	0.00	0.00	0.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.23	0.23	0.00	0.00	0.00	0.00	0.00	0.00
Mecklenburg	2.62	2.80	1.32	0.92	0.17	0.13	0.09	0.05	0.17	0.07	0.00	0.00	0.56	0.40	0.15	0.20	0.00	0.00	0.00	0.00
Neuse	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00
New River	0.81	0.62	0.21	0.41	0.00	0.00	0.21	0.00	0.00	0.21	0.00	0.00	0.00	0.21	0.21	0.00	0.00	0.00	0.00	0.00
Onslow	0.00	0.23	0.00	0.20	0.00	0.23	0.00	0.00	0.00	0.00	0.00	0.00	0.71	0.00	0.00	0.40	0.00	0.00	0.00	0.00
OPC	0.57	0.76	0.17	0.49	0.95	0.95	0.00	0.33	0.19	0.00	0.00	0.00	0.00	0.38	0.17	0.33	0.00	0.00	0.00	0.00
Pathways	1.78	1.35	4.17	0.51	1.00	0.56	0.88	0.41	0.45	0.00	0.11	0.10	0.89	0.79	0.33	0.10	0.00	0.00	0.00	0.00
Piedmont 1 & 2	4.84	1.90	1.98	4.10	1.40	0.14	0.14	0.48	0.00	0.41	0.57	0.48	0.13	1.08	0.42	0.84	0.00	0.00	0.00	0.00
Pitt	1.67	1.88	0.70	1.20	0.00	0.00	0.00	0.24	0.24	0.23	0.23	0.00	0.48	0.47	0.23	0.00	0.00	0.00	0.00	0.00
Riverstone	0.00	0.00	0.00	0.00	0.00	0.00	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.27	0.00	0.00	0.00	0.00	0.00
Roanoke-Chowan	0.28	0.80	2.26	1.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.06	0.25	0.23	0.00	0.00	0.00	0.00
Rockingham	0.00	0.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Sandhills <sup>1</sup>	5.57	1.30	0.46	0.54	0.12	0.12	0.00	0.09	0.00	0.00	0.00	0.00	0.36	0.47	0.00	0.45	0.00	0.00	0.00	0.00
Smoky Mountain	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.13	0.00	0.00	0.00	0.00
Southeastern Center	0.58	1.59	1.45	1.23	0.00	0.14	0.15	0.00	0.00	0.00	0.00	0.15	0.29	0.00	0.44	0.31	0.00	0.00	0.00	0.00
Southeastern Regional	0.23	0.23	0.68	1.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.12	0.00	0.81	0.00	0.00	0.00	0.00
Tideland	0.00	0.00	0.00	0.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VGFW	0.00	0.51	0.00	0.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.25	0.00	0.25	0.23	0.00	0.00	0.00	0.00
Wake	0.52	2.47	1.74	1.22	0.52	0.24	0.00	0.00	1.05	0.00	0.54	0.00	0.13	0.12	0.00	0.20	0.00	0.00	0.00	0.00
Western Highlands 1 & 2	0.53	0.11	0.77	1.09	0.00	0.00	0.00	0.00	1.18	0.44	0.66	0.65	0.00	0.12	0.22	0.11	0.00	0.00	0.00	0.00
Wilson-Greene	0.36	0.11	0.17	0.00	0.00	0.00	0.86	0.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.16	0.00	0.00	0.00	0.00
All AA/CPs Reporting		1.13	0.98	0.93	0.21	0.12	0.13	0.13	0.17	0.10	0.13	0.10	0.24	0.28	0.19	0.10	0.00	0.00	0.004	0.00
Minimum	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Median	0.57	0.62	0.46	0.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.10	0.12	0.15	0.18	0.00	0.00	0.00	0.00
Maximum	5.57	5.43	4.62	4.10	2.81	1.54	1.03	2.84	1.64	2.31	3.08	2.84	1.14	1.08	0.77	1.27	0.00	0.00	0.12	0.00

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

# Table 14 - Quarterly Numbers of Consumers in Restraint or Seclusion at Time of Critical Incidents

This table summarizes the numbers of consumers who were in restraint or seclusion at the time of a critical incident.

Of the reported cases, nearly all were situations where physical restraint was being used. Statewide the total number of reported cases is down sharply.

	Reported Cases of Consumer in Restraint or Seclusion at Time of Critical Incident  Total Cases of Restraint or Seclusion (unduplicated)  Physically Restrained Chemically Restrained In Seclusion															
					Ph	ysically	Restrair	ned	Ch	emically	Restrai	ned		In Sec	lusion	
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0
Albemarle	8	11	15	19	17	11	15	19	0	0	0	0	0	0	0	0
Catawba	0	24	27	8	0	24	27	8	0	0	0	0	0	0	0	0
Centerpoint	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Crossroads	16	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cumberland	1	3	0	1	1	3	0	1	0	0	0	0	0	0	0	0
Durham	0	1	5	2	0	1	4	2	0	0	0	0	0	0	1	0
Eastpointe <sup>1</sup>	0	0	5	4	0	0	5	4	0	0	0	0	0	0	0	0
Edgecombe-Nash	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Foothills	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Guilford	0	0	0	4	0	0	0	4	0	0	0	0	0	0	0	0
Johnston	3	4	3	2	3	6	3	2	0	0	0	0	0	0	0	0
Lee-Harnett	0	0	1	1	0	0	1	1	0	0	0	0	0	0	0	0
Mecklenburg	104	100	4	4	98	97	4	4	6	0	0	0	0	4	0	0
Neuse	0	0	1	1	0	0	1	1	0	0	0	0	0	0	0	0
New River	16	1	0	0	16	1	0	0	0	0	0	0	0	0	0	0
Onslow	11	4	8	23	11	4	8	23	0	0	0	0	0	0	0	0
OPC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pathways	31	18	7	15	29	18	6	14	0	0	0	0	2	0	1	1
Piedmont 1 & 2	55	76	85	40	51	68	85	40	0	0	0	0	3	8	0	0
Pitt	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Riverstone	0	0	1	1	0	0	0	1	0	0	1	0	0	0	0	0
Roanoke-Chowan	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Rockingham	1	0	0	2	1	0	0	2	0	0	0	0	0	0	0	0
Sandhills <sup>1</sup>	1	3	1	3	1	3	1	3	0	0	0	0	0	0	0	0
Smoky Mountain	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
Southeastern Center	0	7	68	0	0	7	68	0	0	0	0	0	0	0	0	0
Southeastern Regional	9	0	12	7	9	0	12	7	0	0	0	0	0	0	0	0
Tideland	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
VGFW	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Wake	2	2	2	15	2	2	2	15	0	0	0	0	0	0	0	0
Western Highlands 1 & 2	0	1	12	0	0	1	12	0	0	0	0	0	0	0	0	0
Wilson-Greene	1	1	2	0	1	1	2	0	0	0	0	0	0	0	0	0
All AA/CPs																
Reporting	260	258	260	152	241	249	257	151	6	0	1	0	5	12	2	1

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table 15 - Quarterly Rate of Reported Cases of Consumers in Restraint or Seclusion at Time of Critical Incident per 1,000

This table summarizes the rates of reported use of restraint or seclusion at the time of critical incidents per 1,000 active consumers. These rates offer a better comparison measure than the actual numbers due to the significant variation in program size.

Statewide the rate of reported use of seclusion or restraint at the time of a critical incident was 0.61 per 1,000 active consumers in the fourth quarter, a noticeable drop from the prior three quarters. The wide variation in rates is likely due to the small numbers and incomplete reporting.

	Rate of Reported Cases of Consumers in Restraint or Seclusion at Time of Critical Incident per 1,000 Active Consumers  Total Cases of Restraint or Seclusion (unduplicated)  Physically Restrained Chemically Restrained In Seclusion														ners	
	Total	Cases o	of Restra	int or	Dh	voicelly	Dootroir	and .	Ch	omically	Dootroi	d		In Coo	lucion	
	Secl	usion (u	nduplica	ated)	Pn	ysically	Restrair	iea	Cn	emicany	Restrail	ieu		in Sec	iusion	
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	0.00	0.00	0.20	0.00	0.00	0.00	0.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Albemarle	2.20	3.28	4.68	6.05	4.67	3.28	4.68	6.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Catawba	0.00	8.05	8.67	2.74	0.00	8.05	8.67	2.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Centerpoint	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Crossroads	3.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Cumberland	0.23	0.68	0.00	0.21	0.23	0.68	0.00	0.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Durham	0.00	0.18	0.94	0.36	0.00	0.18	0.75	0.36	0.00	0.00	0.00	0.00	0.00	0.00	0.19	0.00
Eastpointe 1	0.00	0.00	0.53	0.41	0.00	0.00	0.53	0.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Edgecombe-Nash	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Foothills	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Guilford	0.00	0.00	0.00	0.25	0.00	0.00	0.00	0.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Johnston	1.00	1.33	0.93	0.59	1.00	2.00	0.93	0.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Lee-Harnett	0.00	0.00	0.23	0.21	0.00	0.00	0.23	0.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Mecklenburg	3.63	3.30	0.12	0.10	3.42	3.20	0.12	0.10	0.21	0.00	0.00	0.00	0.00	0.13	0.00	0.00
Neuse	0.00	0.00	0.19	0.19	0.00	0.00	0.19	0.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
New River	3.25	0.21	0.00	0.00	3.25	0.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Onslow	2.59	0.92	1.77	4.58	2.59	0.92	1.77	4.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Pathways	3.45	2.03	0.77	1.54	3.23	2.03	0.66	1.44	0.00	0.00	0.00	0.00	0.22	0.00	0.11	0.10
Piedmont 1 & 2	7.01	10.30	12.02	4.82	6.50	9.21	12.02	4.82	0.00	0.00	0.00	0.00	0.38	1.08	0.00	0.00
Pitt	0.00	0.23	0.00	0.00	0.00	0.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Riverstone	0.00	0.00	0.27	0.26	0.00	0.00	0.00	0.26	0.00	0.00	0.27	0.00	0.00	0.00	0.00	0.00
Roanoke-Chowan	0.00	0.27	0.00	0.00	0.00	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Rockingham	0.41	0.00	0.00	0.88	0.41	0.00	0.00	0.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Sandhills 1	0.12	0.35	0.12	0.27	0.12	0.35	0.12	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Smoky Mountain	0.16	0.00	0.00	0.00	0.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Southeastern Center	0.00	1.01	9.87	0.00	0.00	1.01	9.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Southeastern Regional	1.05	0.00	1.37	0.71	1.05	0.00	1.37	0.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Tideland	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
VGFW	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Wake	0.26	0.24	0.22	1.53	0.26	0.24	0.22	1.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Western Highlands 1 & 2	0.00	0.11	1.32	0.00	0.00	0.11	1.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Wilson-Greene	0.18	0.18	0.34	0.00	0.18	0.18	0.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All AA/CPs																
Reporting	1.13	1.13	1.12	0.61	1.05	1.09	1.11	0.60	0.03	0.00	0.00	0.00	0.02	0.05	0.01	0.00
Minimum	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Median	0.00	0.11	0.19	0.19	0.00	0.11	0.12	0.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Maximum	7.01	10.30	12.02	6.05	6.50	9.21	12.02	6.05	0.21	0.00	0.27	0.00	0.38	1.08	0.19	0.10
1					0.00	0.L.										

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

#### Table 16 - Quarterly Numbers of Total Reported Uses and Consumers in Seclusion and Restraint

This table summarizes all the reported uses of restraint or seclusion including cases where no critical incident happened. Because of the wording of this reporting requirement, not all providers may be reporting this information to local area authorities. It may be limited to contract providers.

This reporting of all uses of seclusion and restraint shows higher numbers in the fourth quarter with physical restraint representing nearly all of the reported cases.

	Reported Uses Physical Restraint Chemical Restraint Seclusion												Number of Consumers Restrained or Secluded											
	Phy	/sical	Restr	aint	Che	mical	Restr	aint		Secl	usion		Phy	/sical	Restr	aint	Che	mical	Resti	raint		Secl	usion	
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	0	10	26	33	0	0	0	0	0	0	0	0	0	3	8	4	0	0	0	0	0	0	0	0
Albemarle	17	11	15	41	0	0	0	0	0	0	0	0	8	7	10	19	0	0	0	0	0	0	0	0
Catawba	35	24	27	8	0	0	0	0	0	0	0	0	10	18	22	3	0	0	0	0	0	0	0	0
Centerpoint	12	7	12	11	0	0	0	0	1	0	2	0	8	4	6	6	0	0	0	0	1	0	2	0
Crossroads	13	69	72	33	0	0	0	0	3	9	37	25	13	24	26	13	0	0	0	0	3	3	7	10
Cumberland	36	14	46	15	0	0	0	0	0	0	0	0	21	11	22	10	0	0	0	0	0	0	0	0
Durham	2	1	4	2	0	0	0	0	0	0	1	0	2	1	3	2	0	0	0	0	0	0	1	0
Eastpointe 1	154	184	233	136	0	0	0	0	0	0	0	0	11	11	18	36	0	0	0	0	0	0	0	0
Edgecombe-Nash	33	21	8	5	0	0	0	0	0	0	0	0	11	8	6	2	0	0	0	0	0	0	0	0
Foothills	22	34	12	15	0	0	0	0	0	0	0	0	15	19	8	9	0	0	0	0	0	0	0	0
Guilford	23	7	9	2	0	0	0	0	0	0	0	0	8	1	3	2	0	0	0	0	0	0	0	0
Johnston	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lee-Harnett	1	1	2	8	0	0	0	0	0	0	0	0	1	1	2	5	0	0	0	0	0	0	0	0
Mecklenburg	98	97	21	364	6	0	0	0	0	4	4	2	42	53	17	145	4	0	0	0	0	4	4	2
Neuse	19	7	13	1	0	0	0	0	0	0	0	0	3	4	5	1	0	0	0	0	0	0	0	0
New River	16	17	6	12	0	0	0	0	0	0	0	0	5	9	5	10	0	0	0	0	0	0	0	0
Onslow	11	4	1	23	0	0	0	0	0	0	0	0	6	3	8	14	0	0	0	0	0	0	0	0
OPC	2	0	1	4	0	0	0	0	0	0	0	0	2	0	1	4	0	0	0	0	0	0	0	0
Pathways	19	13	6	14	0	0	0	0	2	0	1	1	19	13	6	14	0	0	0	0	2	0	1	1
Piedmont 1 & 2	51	68	85	40	0	0	0	0	3	8	0	0	29	63	42	28	0	0	0	0	1	7	0	0
Pitt	0	15	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Riverstone	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0
Roanoke-Chowan	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Rockingham	1	0	0	2	0	0	0	0	0	0	0	0	1	0	0	2	0	0	0	0	0	0	0	0
Sandhills <sup>1</sup>	86	37	12	16	0	0	0	0	0	0	0	35	16	15	9	15	0	0	0	0	0	0	0	4
Smoky Mountain	1	1	0	15	0	0	0	0	0	0	0	0	1	1	0	11	0	0	0	0	0	0	0	0
Southeastern Center	40	6	68	51	0	0	0	0	0	0	0	0	40	6	15	21	0	0	0	0	0	0	0	0
Southeastern Regional	59	18	14	7	0	0	0	0	2	7	0	0	24	11	9	4	0	0	0	0	2	4	0	0
Tideland	8	0	0	0	0	0	0	0	0	0	0	0	6	0	0	0	0	0	0	0	0	0	0	0
VGFW	1	2	1	2	0	0	0	0	5	3	5	3	1	2	1	2	0	0	0	0	5	3	3	3
Wake	0	2	15	30	0	0	1	0	0	0	1	0	0	2	11	15	0	0	1	0	0	0	1	0
Western Highlands 1 & 2	20	6	12	12	0	0	0	0	0	0	0	0	17	3	5	9	0	0	0	0	0	0	0	0
Wilson-Greene	1	3	4	0	0	0	0	0	0	0	0	0	1	3	2	0	0	0	0	0	0	0	0	0
All AA/CPs Reporting	781	680	725	903	6	0	2	0	16	31	51	66	321	298	270	407	4	0	2	0	14	21	19	20

Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.

## Table 17 - Quarterly Rate of Reported Total Use of Seclusion and Restraint

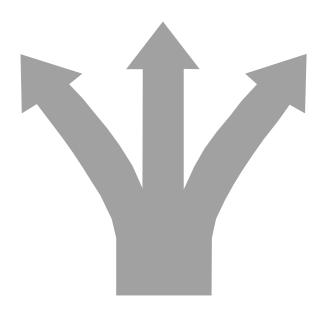
This table summarizes rates of all reported uses of restraint or seclusion per 1,000 active consumers. This includes cases where no critical incident occurred. These rates offer a better comparison measure than the actual numbers due to the significant variation in program size.

Statewide, the reported uses of physical restraint was 3.60 per 1,000 active consumers in the fourth quarter and represents nearly all the reported cases. This represents the highest quarterly statwide rate for the year, but the pattern is not consistent across all programs. On average, physical restraints were used 2.2 times per consumer who was restrained during the quarter.

	l	Use of Restraint or Seclusion per 1,000 Active Consumer  Physical Restraint Chemical Restraint Seclusion											Average Uses of Restraint or Seclusion per Consumer											
	Phy	sical	Restr	aint	Che	mical	Restr	aint		Seclu	ısion		Phy	sical	Restr	aint	Che	mical	Restr	aint		Secl	usion	
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Alamance-Caswell	0.00	1.94	5.09	5.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	None	3.3	3.3	8.3	None	None	None	None	None	None	None	None
Albemarle	4.67	3.28	4.68	13.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.1	1.6	1.5	2.2	None	None	None	None	None	None	None	None
Catawba	12.54	8.05	8.67	2.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.5	1.3	1.2	2.7	None	None	None	None	None	None	None	None
Centerpoint	0.91	0.62	1.08	0.92	0.00	0.00	0.00	0.00	0.08	0.00	0.18	0.00	1.5	1.8	2.0	1.8	None	None	None	None	1.0	None	1.0	None
Crossroads	2.76	15.05	16.23	6.70	0.00	0.00	0.00	0.00	0.64	1.96	8.34	5.08	1.0	2.9	2.8	2.5	None	None	None	None	1.0	3.0	5.3	2.5
Cumberland	8.20	3.17	10.12	3.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.7	1.3	2.1	1.5	None	None	None	None	None	None	None	None
Durham	0.30	0.18	0.75	0.36	0.00	0.00	0.00	0.00	0.00	0.00	0.19	0.00	1.0	1.0	1.3	1.0	None	None	None	None	None	None	1.0	None
Eastpointe <sup>1</sup>	15.38	19.21	24.71	13.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.0	16.7	12.9	3.8	None	None	None	None	None	None	None	None
Edgecombe-Nash	7.73	5.39	2.05	1.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.0	2.6	1.3	2.5	None	None	None	None	None	None	None	None
Foothills	2.24	3.42	1.44	1.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.5	1.8	1.5	1.7	None	None	None	None	None	None	None	None
Guilford	1.40	0.41	0.52	0.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.9	7.0	3.0	1.0	None	None	None	None	None	None	None	None
Johnston	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	None	None	None	None	None	None	None	None	None	None	None	None
Lee-Harnett	0.23	0.23	0.46	1.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.0	1.0	1.0	1.6	None	None	None	None	None	None	None	None
Mecklenburg	3.42	3.20	0.64	9.09	0.21	0.00	0.00	0.00	0.00	0.13	0.12	0.05	2.3	1.8	1.2	2.5	1.5	None	None	None	None	1.0	1.0	1.0
Neuse	4.00	1.32	2.41	0.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.3	1.8	2.6	1.0	None	None	None	None	None	None	None	None
New River	3.25	3.51	1.25	2.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.2	1.9	1.2	1.2	None	None	None	None	None	None	None	None
Onslow	2.59	0.92	0.22	4.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.8	1.3	0.1	1.6	None	None	None	None	None	None	None	None
OPC	0.38	0.00	0.17	0.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.0	None	1.0	1.0	None	None	None	None	None	None	None	None
Pathways	2.12	1.46	0.66	1.44	0.00	0.00	0.00	0.00	0.22	0.00	0.11	0.10	1.0	1.0	1.0	1.0	None	None	None	None	1.0	None	1.0	1.0
Piedmont 1 & 2	6.50	9.21	12.02	4.82	0.00	0.00	0.00	0.00	0.38	1.08	0.00	0.00	1.8	1.1	2.0	1.4	None	None	None	None	3.0	1.1	None	None
Pitt	0.00	3.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	None	15.0	None	None	None	None	None	None	None	None	None	None
Riverstone	0.00	0.00	0.00	0.26	0.00	0.00	0.27	0.00	0.00	0.00	0.00	0.00	None	None	None	1.0	None	None	1.0	None	None	None	None	None
Roanoke-Chowan	0.00	0.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	None	1.0	None	None	None	None	None	None	None	None	None	None
Rockingham	0.41	0.00	0.00	0.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.0	None	None	1.0	None	None	None	None	None	None	None	None
Sandhills <sup>1</sup>	10.41	4.36	1.38	1.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.17	5.4	2.5	1.3	1.1	None	None	None	None	None	None	None	8.8
Smoky Mountain	0.16	0.15	0.00	2.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.0	1.0	None	1.4	None	None	None	None	None	None	None	None
Southeastern Center	5.81	0.87	9.87	7.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.0	1.0	4.5	2.4	None	None	None	None	None	None	None	None
Southeastern Regional	6.91	2.09	1.59	0.71	0.00	0.00	0.00	0.00	0.23	0.81	0.00	0.00	2.5	1.6	1.6	1.8	None	None	None	None	1.0	1.8	None	None
Tideland	1.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.3	None	None	None	None	None	None	None	None	None	None	None
VGFW	0.25	0.51	0.25	0.46	0.00	0.00	0.00	0.00	1.24	0.76	1.27	0.69	1.0	1.0	1.0	1.0	None	None	None	None	1.0	1.0	1.7	1.0
Wake	0.00	0.24	1.63	3.06	0.00	0.00	0.11	0.00	0.00	0.00	0.11	0.00	None	1.0	1.4	2.0	None	None	1.0	None	None	None	1.0	None
Western Highlands 1 & 2	2.14	0.66	1.32	1.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.2	2.0	2.4	1.3	None	None	None	None	None	None	None	None
Wilson-Greene	0.18	0.53	0.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.0	1.0	2.0	None	None	None	None	None	None	None	None	None
All AA/CPs Reporting	3.41	2.98	3.13	3.60	0.03	0.00	0.01	0.00	0.07	0.14	0.22	0.26	2.4	2.3	2.7	2.2	1.5	None	1.0	None	1.1	1.5	2.7	3.3
Minimum	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00	1.00	0.13	1.00	1.50	None	None	None	1.00	1.00	1.00	1.00
Median	2.12	0.92	1.08	1.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.50	1.60	1.50	1.55	1.50	None	None	None	1.00	1.14	1.00	1.00
Maximum	15.38	19.21	24.71	13.79	0.21	0.00	0.27	0.00	1.24	1.96	8.34	5.08	14.00	16.73	12.94	8.25	1.50	None	None	None	3.00	3.00	5.29	8.75
1	•		•						•						•		•				•			

<sup>&</sup>lt;sup>1</sup> Programs which changed catchment area at some point over last year. See page 5.

<sup>&</sup>lt;sup>2</sup> Programs which have missing data in second quarter due to partial non-reporting. See page 5.



# Please give us feedback so we can improve these reports by making them more informative and more useful to you!

Dale Roenigk or Candy Helms
Quality Management Team
Community Policy Management Section
North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
3004 Mail Service Center
Raleigh, North Carolina 27699-3004

(919) 733-0696 email: contactdmhquality@ncmail.net

The Division's Web Page --- http://www.dhhs.state.nc.us/mhddsas/

15 copies of this document were printed at a cost of \$15.00 or \$1.00 per copy. This report was also distributed electronically by email and through the Division's web page.